

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000290095 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

WILSON CAPITAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

DEC 15 5015

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

12/11/2012

COVER LETTER

TO: Registration Division of C				
	Capital, LLC			
SUBJECT:	Name of Limi	ted Liability Company		
The enclosed Articles (of Amendment and fee(s) are sul	omitted for filing.		
Please return all corres	pandence concerning this matter	to the following:		
	Mayer B. Guttman, Esquire	ŧ		
	**************************************	Name of Person		
	Levin & Gunn, P.A.			
		Firm/Company		
	502 Washington Avenue, 8	th Floor		
•		Address		
	Towson, Maryland 21204 City/State and Zip Code			
	fmarcus@levingann.com	o be used for future annual report notificat	ion\	
For further information	concerning this matter, please c		,	
Mayer E. Gutman		410 321-0600		
Name	of Person	at () Area Code & Daytime Te	clophone Number.	
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	Cl\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	D\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	LING ADDRESS:	STREET/COURIER	ADDRESS:	
	tration Section on of Corporations	Registration Section Division of Corporation)ns	
P.O. Y	30x 6327 Lasson, FL 32314	Clifton Building 2661 Executive Center	· Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

12 DEC 11 AM 9: 17

SECRLYARY OF STATE
TALLMIASSEE, FLORIDA

Wilson Capital, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	Websters 19, 2011	
The Articles of Organization for this Limited Liability Company	were filed on Teology 19, 2011	and assigned
Florida document number L09000103446		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
TPG Funding, LLC		
The new name must be distinguishable and end with the words "Limits "L.L.C."	ed Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST RE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
		·
B. If amending the registered agent and/or registered officestered agent and/or the new registered office address here:		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
Hor Registrated Control Philipping	Enter Florida sti	reet address
	. Flo	rida
	City	rida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance of my duties, ovided for in Chapter 608, F	and I am familiar with and .S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	North, Cariton O.	33 SW Flagier Avenue	Add
***************************************		Stuart, Florida 34994	Remove
		The second secon	
			Add
			Remove
	4		<u></u>
			Add
•			Remove
			Add
		Victor Victor	Remove
			
			Remove
			Remove

Page 2 of 3

MGR = Manager

lf aı	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted_	Decomber 11, 2012.
	Tielle Waln
	Signature of a niconber of authorized representative of a member
	Fielding L. Wilson, Jr.
	Typed or printed name of signee
	Page 1 of 3

Filing Fee: \$25.00