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EXAMINER



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DATE:

03-04-2011

NAME:

25 CAPITAL PARTNERS LLC

TYPE OF FILING: ARTICLES OF AMENDMENT

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Division of Co			
SUBJECT: 25 Cap	pital Partners, LLC		6
		nited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	11 MAR -4
	Rebecca H. Steen, Para	ılegal	
		(Name of Person)	٩
	25 Capital Partners, LLC		2
	<u> </u>	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
	5032 Parkway Plaza Bor	ulevard	
		(Address)	
	Charlotte, North Carolina	a 28217	
	<u> </u>	(City/State and Zip Code)	
For further information o	concerning this matter, please c	all:	
Rebecca H. Steen		at (704) 426-8933	
(Name of Person)		(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fec	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☑\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registr Divisic P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center	ons

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comps (A Florida Limited)	iny as It now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L10000118977</u>	were filed on 10.18.10	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
25 Capital Partners, LLC		
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the desi	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	5032 Parkway Plaza Blvd.,	Sulte 200
(Principal office address MUST BE A STREET ADDRESS)	Charlotte, North Carolina 28	3217
Enter new mailing address, if applicable:	5032 Parkway Plaza Blvd.,	Suite 200
(Mailing address MAY BE A POST OFFICE BOX)	Charlotte, North Carolina 28	3217
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	fice address on our records, e: (Enter Florida	
	. File	orida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM_	RoundPoint Financial Group, les	5032 Parkway Plaza Blyd., Suite 200 Charlotte, North Carolina 28217	Add Remove
MGRM_	25 Capital Holdings, LLC	5032 Parkway Plaza Blvd., Suite 200 Charlotte, North Carolina 28217	■⑦ Add ■ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
			
			- -
Dated <u>March 4</u>	Mula Roxleex		<u>_</u>
		authorized representative of a member	
_	Michael Scott Shuitz	printed name of gipnes	

Page 2 of 2

Filing Fee: \$25.00