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Office Use Only



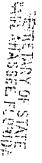
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EXAMINER







N SERVICE COMPANY.
ACCOUNT NO. : I2000000195
REFERENCE : 093974 7867494
AUTHORIZATION Smelle man
COST LIMIT : \$25.00
ORDER DATE: February 13, 2012
ORDER TIME: 10:28 AM
ORDER NO. : 093974-005
CUSTOMER NO: 7867494
CHANGE OF AGENT NAME: 25 CAPITAL HOLDINGS, LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Stephanie Milnes EXT# 2920
EXAMINER:
2012 FEB 14 AM S STATE STATE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Name of the limited liability company: _25 CAPITAL	HOLDINGS, LLC		
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 13024 Ballantyne Corporate Pla Suite 375	ce	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Charlotte NC 28277		
03/04/2011	L11000027500		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of	State:	
Registered Agent:	NRAI Services, Inc.	2017	
Registered Office Address:	515 E. Park Ave. Tallahassee FL 32301	E E	L Marie Mill Marie Marie Marie Marie Marie Marie Marie Marie
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:	STATE STATE	gersan Sign
NEW Registered Agent:	Corporation Service Company	<u> </u>	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street		
	Tallahassee,FL	32301	
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office as case of a Florida limited liability co	nd the business mpany, it is	3
Maurcen Cathell Authorized Person (Printed or typed name of signee)	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	agree to act in this capacity. I furth roper and complete performance of 1 as registered agent as provided fo change in the registered office add d in writing of this change.	ier agree to my duties, and r in Chapter 60 ress, I hereby	! I 98,

(Signature of Registered Agent) Sylvia Queppet, Asst. VP

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00