M07000001462

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SECRETARY OF STATE

ROBINSON BRADSHAW & HINSON

CHARLOTTE OFFICE DIRECT DIAL: 704.377.8176 DIRECT FAX: 704.339.3476

LPERES@RBH.COM

March 24, 2008

VIA OVERNIGHT DELIVERY

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

Re: CapitalSouth Corporation
CapitalSouth Partners F-II, LLC
CapitalSouth Partners F-III, LLC
CapitalSouth Partners Fund I, Limited Partnership
CapitalSouth Partners Fund II, Limited Partnership
CapitalSouth Partners Fund III, L.P.
CapitalSouth Partners SBIC F-III, LLC
CapitalSouth Partners SBIC Fund III, L.P.
CapitalSouth Partners, LLC

To Whom It May Concern:

Enclosed please find the following for each of the above entities:

- 1. Original and one (1) copy of the Statement of Change of Registered Office or Registered Agent for each of the foregoing entities; and
- 2. Our client's checks, each in the amount of \$25.

Please forward evidence of filing the Statements to my attention in the self-addressed, stamped envelopes. Should you have any questions, or require additional documentation, please contact me at 704-377-8176. Thank you for your attention to the foregoing.

Regards,

Laura A. Peres, CLA, NCCP

Certified Paralegal

/lap Enclosures

C-1078030v1 14574.00021

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.

1. The name of the limited liability company is: CapitalSouth Partners, LLC				
2. The mailing address of	of the limited liability company is	: 1011 E. Morehead St., Suite 15	50	
Charlotte, NC 28204				
		·	· ·	
March 13, 2007		M07000001462		
3. Date of filing/registration in Florida		4. Document number		
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:				
•	National Corporate Research	h, Ltd.		
Name				
515 East Park Avenue				
Address			E E 30	
Tallahassee, FL 32301 City, State and Zi		7in	08 HAR	
David H. Reed			AM 10: 35 OF STATE EE FLORID	
Name			10: 35 STATE LORIDA	
1414 W. Swann Ave., Suite 100			음을 잃	
Florida street address (P.O. Box NOT acceptable)				
		606		
City, State and Zip				
confirmed that after the cand the business office of liability company, it is he of the members of the lin or the offerating per the	mpany is not organized under the change or changes are made, the F f the registered agent will be idented that the change (smited liability company or as other of the limited liability company	lorida street address of the regi tical. Or, in the case of a Florid) was/were authorized by an aff	stered office la limited firmative vote	
Joseph B. Alala, III, Mana	ager .			
(Printed or typed name of signee)				
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm	ointment as registered agent and a ns of all statutes relative to the pr nd accept the obligations of my po this document is being filed to me n that the limited liability compan	igree to act in this capacity. I f oper and complete performance sition as registered agent as pr rely reflect a change in the reg y has been notified in writing o	urther agree to e of my duties, ovided for in istered office f this change	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)

(Signature of Registered Agent)