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LLC REGISTERED AGENT CHANGE C-III CAPITAL PARTNERS LLC

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	Same of the limited liability company: C-III Capital Par	tners L	LC						
2. (a)	300 N Main Street STE 402	ain Street STE	E 402						
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			·	Mailing address				
	Greenville, SC 29601			Greenvill	e. SC 29601				
					<u>.</u>				
	08/19/2011			M1100000	4176				
3.	Date of filing/registration in Florida				Document number				
5. (a)	C T CORPORATION SYSTEM								
` `	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	the Flo	rida	Dept, of Sta	Te;				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRI	5.5.5)		_				
					_				
	PLANTATION , FI	L_33324	! —	<u> </u>	_				
(Ъ)	United Agent Group Inc.								
()	Enter name of NEW Registered Agent and/or NEW Registered	d Office	add	ress:	_	127			
	801 US Highway I						113 8cm		
	NEW Registered Office Address:				_				
						,.	(J)		
	North Paim Beach	33.109	,			<i>:</i>		C	
	FI	33408) 		_	٠,٠	Ġ		
change agent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of the l limited	ered cor imi d lis	l office an npany, it i ted liabilit ibility con	d the busines s hereby con v company o	ss office of the firmed that the as otherwi	he regist he chan:	tered ge(s)	
Signi	ignature of a hember or authorized representative of a member				Printed or typed name of signee				
provis the ob- to mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	perfor. d för ir	mai 1 Cl	ice of my lapter 605	duties, and I 5. F.S. Or. if	am familiar this docume	with an nt is bei	d accept ng filed	
Signan	By Ariana Turoski, Special Secretary								