## 756448

(Re	questor's Name)	
. (Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	





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12 JAN 20 PH 1:30

Recharge News 1-20-12 300 North Maitland Ave.

Maitland, Florida 32751

\$\frac{1}{4}\] 407.539.3900 F\; 407.539.0211

Attorneys at Law



C. JOHN CHRISTENSEN, ESQ. jchristensen@KGBlawfirm.com

January 17, 2012

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

Re: Gemini Management Association, Inc.

Change of Registered Agent

Dear Sir / Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly completed by this office. Furthermore, enclosed please find a check made payable to the Florida Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact Cathy Williams, Legal Assistant, at the number listed above.

Sincerely,

KATZMAN GARFINKEL & BERGER

C. John Christensen, Esquire

For the Firm

CJC/caw Enclosures

cc: Gemini Management Association, Inc.

Please note: Naples, St. Augustine and Boynton Beach locations are satellite offices (by appointment only).

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: GEMINI MANAGEMENT ASSOCIATION, INC.  2. The principal office address:  1239 Ocean Hhore Blvd.
Ormond Beach, FL 32176
3. The mailing address (if different): n/a
4. Date of incorporation/qualification: <u>5/Aporil/82</u> Document number: <u>756448</u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
D. J. ORR, CAM
1239 Ocean Shore BLvd.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
KATZMAN GARFINKEL & BERGER
300 N. MAITLAND AVENUE
P.O. Box NOT acceptable
MAITLAND, FLORIDA 32751
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Hannah W. McGuire, Director  Signature of an other or director  Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
C. Signapure of Registered Agent  13 Date
If signing on behalf of an entity:
C. John Christensen, Esq.
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)