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(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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A. LUNT

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EXAMINER

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SECRETARY OF STATE
TALLAHASSFF. FI TORIE

COVER LETTER

TO: Registration Section Division of Corporations	
·	
SUBJECT: Gemini Ranch Lake 2, LLC	
Name of Lim	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Nicole Parnell	SECRETARY OF STATE ALLAHASSEE. FLORID
Name of Person	
Charles Baclet and Associates, In	STATE CORID
Firm/Company	> ***
2875 Michelle Drive, Suite 100	
Address	
In in a CA 00000	
Irvine, CA 92606 City/State and Zip Code	
nparnell@cbaclet.com E-mail address: (to be used for future annual report notif	ication)
E-mail addiess. (to be used for fatale annual report notif	(Carton)
For further information concerning this matter,	please call:
Nicole Parnell	ı (949)
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following :	amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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.

Name of the limited liability company: Gemini Ran	ich Lake 2, LLC	
(a) Principal office address of limited liability compar	ny: 16740 Birkdale	Commons Parkway
(Note: MUST BE STREET ADDRESS)	Suite 301 Huntersville, NC 28078	
(b) Mailing address of limited liability company:	Tiuntersville, 14	0.20070
(Note: MAY BE POST OFFICE BOX)		= 2
40/4/0004		
10/1/2004	L04000071506	
3. Date of filing/registration in Florida	4. Document number	SSEE M
5. (a) Registered Agent and Registered Office shown or		la Dept of sate:
Registered Agent:	Dante A. Massaro	
Registered Office Address:	32 Hannah Cole Drive St. Augustine, FL 32080	
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NRAI Services, Inc. 2731 Executive Park Drive Suite 4	
	Weston	,FL <u>33331</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change (of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of to tical. Or, in the case of a s) was/were authorized b	the registered office a Florida limited y an affirmative vote
Jose Castellanos, Authorized Person		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability company	agree to act in this capa roper and complete perfo osition as registered age verely reflect a change in ny has been notified in w	city. I further agree to ormance of my duties, nt as provided for in the registered office riting of this change.
Signature of Requistered Agent		
Louie Tamantini, Vice President		

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