L04000073005

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UN SENAIGE COMPANA,	
ACCOUNT NO.	: 072100000032
REFERENCE	: 144802 7417111
AUTHORIZATION	Lovell as
COST LIMIT	: 03 25.00 Man
ORDER DATE: May 31, 2006	SEE TO S
ORDER TIME : :59 PM	ORIGINAL 20
ORDER NO. : 144802	ž.
CUSTOMER NO: 7417111	
CHANGE OF A	GENT
	•
NAME: GEMINI BRADEN	TON PROPERTY MANAGER, LLC
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Sara Lea	
EX	AMINER'S INITIALS:

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 limit	ed liability company i	is: GEMINI B	RADENTON PROPE	ERTY MANAGER, LLC		
2. The mailing address o	of the limited liability	company is:				
16740 Birkdale Commons Pk	•	• •				
10/08/2004			L04000073005			
3. Date of filing/registrat	ion in Florida		4. Document nu	ımber		
5. The name of the regist Florida Department of		gistered office	address as shown	on the records of the		
•	Phili	p H. Ward, III, I	Esq.	100		
		Name				
	44	120 Beacon Circ	e	- 翌年		
Address						
West Palm Beach, FL 33407 City, State and Zip						
6. The name and address	•	• /	•	F. 57 9.		
o. The name and address	of the new registered	agent and/or	office.	월 2		
	Согрога	tion Service Cor	npany	_		
	10	Name				
1201 Hays Street						
Florida street address (P.O. Box NOT acceptable)						
	Tallahassee	FL	32301			
	City,	, State and Zip)			
If the limited liability corconfirmed that after the cand the business office of liability company, it is he of the members of the lir or the operating agreement (Signature of a member or author)	change or changes are fithe registered agent creby confirmed that the nited liability comparent of the limited liabil	made, the Flowill be identified the change(s) may or as other lity company.	orida street addres cal. Or, in the cas was/were authoriz	s of the registered office		
Dante Massaro, Vice Presider	nt					
(Printed or typed name of signee						
/\	intment as registered is of all statutes related accept the obligation this document is being that the limited liable with the limited liable.	agent and ag ive to the propose of my posing filed to merelity company	ree to act in this of per and complete ition as registered ely reflect a chang has been notified	capacity. I further agree to performance of my duties, I agent as provided for in ge in the registered office in writing of this change.		
(Signature of Registered Agent)	Jacqueline M. Giles, AVI	P P				

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

INHS18 (8/05)