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| PICK-UP WAIT MAIL | |
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| (Business Entity Name) | |
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| July 27, 2005 | <u> </u> | | | | | |

| SERVICES | | ORPORATION NAME (S) AND DOCU miami 6, LLC | MENT NUMBER (S): | | | |
|---|-------------|--|---|--|--|--|
| Filing Evidence ☑ Plain/Confirmation (| Сору | | Type of Document ☐ Certificate of Status | | | |
| □ Certified Copy | | □ Certificate of Go | ood Standing | | | |
| | | □ Articles Only | | | | |
| Retrieval Request Photocopy | | ☐ All Charter Doc Articles & Ame ☐ Fictitious Name | ndments | | | |
| □ Certified Copy | | □ Other | OS JUL | | | |
| NEW FILINGS | | AMENDMENTS | SSEE C | | | |
| Profit | | Amendment | AM 9: 03 EFFLORIB | | | |
| Non Profit | | Resignation of RA Officer/Director | PREF 03 | | | |
| Limited Liability | x | Change of Registered Agent | | | | |
| Domestication | | Dissolution/Withdrawal | } | | | |
| Other | | Merger | | | | |
| | | | 7 | | | |
| OTHER FILINGS | | REGISTRATION/QUALIFICATION | | | | |
| Annual Reports | | Foreign | | | | |
| Fictitious Name | | Limited Liability | | | | |
| Name Reservation | | Reinstatement | | | | |
| Reinstatement | | Trademark | j | | | |
| | | Other | | | | |

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

| 1 | JOHN FOR EMMIL | D LIMBILITY CO | 7172 772 1 | | | |
|--|--|--|---|---|---|--|
| Pursuant to the provisions liability company submits t agent, or both, in the State (| he following statemer of Florida. | it in order to chang | ge its register | he undersi red office | igned limited or registered | |
| 1. The name of the limited | liability company is: | Gemini Tamiami | 6, LLC | | • | |
| 2. The mailing address of t | | | | nmons Pa | arkway | |
| Suite 301, Huntersville, I | | | | | | |
| June 17, 2005 | | M050 | 00003300 | - | | |
| 3. Date of filing/registration | n in Florida | 4. Document number | | | | |
| 5. The name of the registere Florida Department of St | d agent and the registe ate: UCC Filing & Search | | s shown on t | he records | of the | |
| Name 526 East Park Avenue | | | | SEC SEC | ì | |
| - | A Fallahassee, FL 323 | idress HASSE | | | | |
| 5. The name and address of | • | - | | OF STATE | | |
| Philip H. Ward, III | | | | | | |
| | No Ward, Damon & Posr | ame ier, P.A., 4420 Beaco | on Circle | A | . | |
|] | Florida street address (| P.O. Box NOT acc | eptable) | | | |
| V | Vest Palm Beach | FL 33407 | | | | |
| | City, Sta | te and Zip | | | | |
| f the limited liability compared that after the charmed that after the charmed the business office of the liability company, it is hereby the members of the limited limited limited of the operating agreement of the | nge or changes are made registered agent will y confirmed that the c lability company or as | le, the Florida street be identical. Or, in hange(s) was/were otherwise provided | t address of the the case of a authorized by | he register a Florida li v an affirm | red office imited lative vote of | |
| Signature of a member or authorized | representative of a member) | ······································ | | | | |
| ANTONIA Lo De Printed or typed name of signee of the appoint to the provisions of the appoint the provisions of the appoint and a lam familiar with and a lapter 608, F.S. Or, if the address, I hereby confirm the | ٤ડ | nt and agree to act o the proper and co of my position as re ed to merely reflect | in this capac mplete perfo gistered ager a change in i | ity. I furth rmance of nt as provi the reviste | her agree to my duties, ded for in cred office | |
| ddress, I hereby confirm the | at the limited liability | company has been i | notified in wr | iting of the | is chänge. | |
| Signature of Registered Agent) | | | | | | |
| Division a | of Cornerations DA | Roy 6327 Tollaho | 27 FT 27 | /31 <i>A</i> | | |

FILING FEE: \$25.00

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