## MU5000004031

(Requestor's Name)  (Address)				
			(Address)	
(City/State/Zip/Phone #)	_			
PICK-UP WAIT MAIL				
(Business Entity Name)	-			
(Document Number)				
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B. KOHR

DEC 1 0 2012

EXAMINER



800242198108

DEPARTMENT OF STATE





ACCOUNT NO. : I2000000195

REFERENCE : 445710 7691957

AUTHORIZATION

COST LIMIT

ORDER DATE: December 5, 2012

ORDER TIME : 10:52 AM

ORDER NO. : 445710-162

CUSTOMER NO: 7691957

## CHANGE OF AGENT

NAME: GEMINI TAMIAMI 15, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'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.	Naı	ne of the limited liability company: GEMINI TAMIAN	4I 15, LLC
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	16740 Birkdale Commons Pkwy Ste 306 Huntersville NC 26078
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	16740 Birkdale Commons Pkwy Ste 306 Huntersville NC 26078
	7/21	/2005	M05000004031
3.	Dat	re of filing/registration in Florida	. Document number
5.	(a)	Registered Agent and Registered Office shown on the	ne records of the Florida Dept. State
		Registered Agent:	NRAI Services Inc.
		Registered Office Address:	515 E. Park Avenue Tallahassee FL 32301
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Registered Office address:  Corporation Service Company
			1201 Hays Street
	(MUST BE FLORIDA STREET ADDRESS)		Tallahassee ,FL 32301
tha of he lia	at affice reby bilit	limited liability company is not organized under the later the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cay confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	address of the registered office and the business se of a Florida limited liability company, it is
(SI	gnatu	to a member of authorized representative of a member)	
		een Cathell, Authorized Person or typed name of signee)	
co an F.	here mpl 1 fai S. ( nfi <b>r</b>	by accept the appointment as registered agent and as y with the provisions of all statutes relative to the pro niliar with and accept the obligations of my position of yr, if this document is being filed to merely reflect a c muthat the limited liability company has been notified	ree to act in this capacity. I further agree to per and complete performance of my duties, and I is registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
By	ا، ر	dian Whant	arah Wright, Asst. Vice President

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