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SECRETARY OF STATE BALLAHASSEE FLORID

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COVER LETTER

	on of Corporations		
SUBJECT:	Gemini Boynton Beach 1, LLC		
	Name of	Limited I	Liability Company
Dear Sir or M	ladam:		
The enclosed	Registered Agent/Registered (Office Ch	hange and fee(s) are submitted for filing.
Please return	all correspondence concerning	this mat	tter to the following:
	Nicole Parnell		
	Name of Person		
Ch	arles Baclet and Associates Firm/Company	, Inc.	
;	2875 Michelle Drive, Suite 1 Address	00	
	Irvine, CA 92606 City/State and Zip Code		
E-mail add	nparnell@cbaclet.com	notification	1)
For further in	formation concerning this mat	ter, pleas	se call:
	Nicole Parnell	at (949) 955-9585
	Name of Person		Arca Code & Daytime Telephone Number
Regist Divisi Clifto 2661 l	ET/COURIER ADDRESS: cration Section on of Corporations n Building Executive Center Circle classee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclo	osed is a check for the followi	ng amou	unt:
✓ \$2:	5 Filing Fee	ſ	\$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.

: 16740 Birkdale Commons Parkway
Suite 301 Huntersville, NC 28078
M0500006374 4. Document number
the records of the Florida Dept. of State:
Dante A. Massaro
32 Hannah Cole Drive St. Augustine, FL 32080
V Registered Office address: NRAI Services, Inc.
2731 Executive Park Drive Suite 4 Weston ,FL33331
aws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.
SECRE
gree to act in this capacity. I further derection per and complete performance of my duties,

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