M05000006378

(Requestor's Name)	
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PICK-UP . WAIT MAIL	
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(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	-
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Office Use Only



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S. HAWKES

JUN 1 5 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ		Limited	l Liability Cor	npany	_	
	Nume of	Limite	i Didollity Col	ripuriy		
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered	Office (Change and fee	e(s) are submitted for filing.		
Please	return all correspondence concerning	g this m	atter to the fol	lowing:		
	Nicole Parnell					
	Name of Person					
	Charles Baclet and Associates	s. Inc.				
	Firm/Company					
2875 Michelle Drive, Suite 100						
	Address					
	Irvine, CA 92606					
	City/State and Zip Code					
	nparnell@cbaclet.com					
E-	nparnell@cbaclet.com mail address: (to be used for future annual report	notification	on)			
For fu	rther information concerning this ma	tter, ple	ase call:			
	Nicole Parnell	at (_	949)	955-9585	_	
	Name of Person		Area Coo	le & Daytime Telephone Number		
	STREET/COURIER ADDRESS:		MAILING	ADDRESS:		
	Registration Section		Registratio			
	Division of Corporations			Corporations		
	Clifton Building 2661 Executive Center Circle		P.O. Box 6	327 e, Florida 32314		
	Tallahassee, Florida 32301		ramanassee	e, Florida 32314		
	Enclosed is a check for the follow	ing amo	ount:			
	\$25 Filing Fee		\$55 Filin	g 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.

1. Name of the limited liability company: Gemini Boynton E	Beach 5, LLC		
2. (a) Principal office address of limited liability company:	16740 Birkdale Commons Parkway		
(Note: MUST BE STREET ADDRESS)	Suite 301 Huntersville, NC 28078		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
11/17/2005	M05000006378		
3. Date of filing/registration in Florida 4	1. Document number		
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:		
Registered Agent:	Dante A. Massaro		
Registered Office Address:	32 Hannah Cole Drive St. Augustine, FL 32080		
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Office address:		
NEW Registered Agent:	NRAI Services, Inc.		
	2731 Executive Park Drive		
(MUST BE FLORIDA STREET ADDRESS)	Suite 4 Weston ,FL33331		
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identi- liability company, it is hereby confirmed that the change(s)	orida street address of the registered office cal. Or, in the case of a Florida limited		
of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	vise provided in the articles of organization		
of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.	vise provided in the articles of organization		

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