M0500000668

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	· e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



500157051685

06/12/09--01054--001 **2600.00



S. HAWKES
JUN 1 5 2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Gemini Boynton Beach 9, LLC		
	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Nicole Parnell		
Name of Person	· ·	
Charles Baclet and Associates, Inc.		
Firm/Company		
2875 Michelle Drive, Suite 100		
Address		
Irvine, CA 92606		
City/State and Zip Code		
nparneli@cbaclet.com E-mail address: (to be used for future annual report notification		
E-mail address. (to be used for future annual report normeans	n)	
For further information concerning this matter, plea	ase call:	
Nicole Parnell at (949) 955-9585	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
W 425 1 11111g 1 00		

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	Beach 9, LLC	
2. (a) Principal office address of limited liability company	: 16740 Birkdale Commons Parkway	
(Note: MUST BE STREET ADDRESS)	Suite 301 Huntersville, NC 28978	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
TWICE MITH BET OBT OFFICE BOX		
11/22/2005	M05000006428	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	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 <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent:</u> NEW Registered Agent: NEW Reg		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2731 Executive Park Drive Suite 4	
	Weston ,FL 33331	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member		
Jose Castellanos, Authorized Person Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or if this document is being filed to me address. Thereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	

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

Signature of Registered Agent Louie Tamantini, Vice President