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ACCOUNT NO. : 07210000032 REFERENCE: 144802 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE: May 31, 2006 ORDER TIME : :59 PM ORDER NO. : 144802-015 CUSTOMER NO: 7417111 CHANGE OF AGENT NAME: GEMINI BOYNTON BEACH 12, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
PLAIN STAMPED COPY CONTACT PERSON: Sara Lea

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. The name of the limite	d liability company	is: GEMINI BO	DYNTON BEACH	12, LLC	
2. The mailing address of	the limited liability	company is:			
16740 Birkdale Commons Pky	wy., Suite 301, Huntersv	ille, NC 28078			
12/30/2005			M06000000004		
3. Date of filing/registrati	on in Florida		4. Document n	umber	
5. The name of the registe Florida Department of S		gistered office	address as show	n on the records of the	
	Register	ed Agent Solutio	ns, Inc.		
		Name		·	
	13	33 N. Duval Stre	et	- # S	
Address				FE 2 T	
		lahassee, FL 323 y, State and Z		2006 JUN -5 TALLAHASS	
C 0771 1 1 1 1		•	•	Sea 5	
6. The name and address of	of the new registered	agent and/or	office:	門 星 口	
	Corpora	tion Service Cor	npany	9: 20 F STATE FFLORIT	
		Name		- 월 2	
		201 Hays Street		. P	
	Florida street addre	ess (P.O. Box	NOT acceptable)	
	Tallahassee	FL	32301		
	City	, State and Zip)		
If the limited liability come confirmed that after the chand the business office of liability company, it is her of the members of the limited or the operating agreement (Signature of a member or authority).	nange or changes are the registered agent reby confirmed that the little liability compart of the limited liability.	made, the Flowill be identified the change(s) my or as other lity company.	orida street addregal. Or, in the cawas/were authori	f Florida, it is hereby ss of the registered office se of a Florida limited zed by an affirmative vote the articles of organization	
Dante Massaro, Vice President	•				
(Printed or typed name of signee)					
(hogyulu	intment as registered s of all statutes relat d accept the obligati his document is bein that the limited liab acqueline M. Giles, AV	les	ree to act in this per and complete tition as registere ely reflect a chan has been notified	capacity. I further agree to performance of my duties, d agent as provided for in ge in the registered office I in writing of this change.	

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