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EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Gemini Boynton Beach 13, LLC	
Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Nicole Parnell Name of Person	
Charles Baclet and Associates, Inc.	
2875 Michelle Drive, Suite 100 Address	
Irvine, CA 92606 City/State and Zip Code	
nparnell@cbaclet.com E-mail address: (to be used for future annual report notification)	ition)
For further information concerning this matter, p	lease call:
Nicole Parnell at ((949) 955-9585
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee	\$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. 1. Name of the limited liability company: Gemini Boynton Beach 13, LLC 16740 Birkdale Commons Parkwa 2. (a) Principal office address of limited liability company: Suite 301 (Note: MUST BE STREET ADDRESS) Huntersville, NC (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 12/30/2005 M06000000005 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Dante A. Massaro Registered Agent: 32 Hannah Cole Drive Registered Office Address: St. Augustine, FL 32080 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NRAI Services, Inc. **NEW** Registered Agent: 2731 Executive Park Drive **NEW** Registered Office Address: Suite 4 (MUST BE FLORIDA STREET ADDRESS) FL 33331 Weston 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 agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company 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