MU60000004786

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DEPARTMENT OF STATE
DIVISION OF CORPORATION

B. KOHR

JAN 23 2009

EXAMINER



ACCOUNT NO. : 07210000032

REFERENCE: 865599 7527156

AUTHORIZATION

ORDER DATE : January 21, 2009

ORDER TIME: 12:32 PM

ORDER NO. : 865599-165

CUSTOMER NO: 7527156

CHANGE OF AGENT

NAME: GEMINI TOWN CENTER H, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret

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. N	. Name of the limited liability company: GEMINI TOWN CENTER H, LLC		
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: <u>c/o Gemini Real Estate Advisors, LLC</u> <u>175 Fifth Avenue, Suite 175</u> New York 10010	
(t	o) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P. J. T.	
		35 E	
_08/	29/2006	ب ما M06000004786	
3. D	ate of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown of	on the 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 Registered Office address:			
	NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address:	1201 Hays Street		
(MUST BE FLORIDA STREET ADDRESS)		Tallahassee ,FL 32301	
that a offic herel liabil	after the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the	d by an affirmative vote of the members of the limited	
(Signa	ture of a member or authorized representative of a member)		
Dan (Print	te Massaro ed or typed name of signee)		
IJΥ.	reby accept the appointment as registered agent and by with the provisions of all statutes relative to the primitian with and accept the obligations of my position of it his document is being filed to merely reflect rem that the limited liability company has been notification sorvices company.	d agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ied in writing of this change.	

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