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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

JUN 1 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Gemini Town Center H, LLC	
Name of Limited	d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	natter 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	
nparnell@cbaclet.com E-mail address: (to be used for future annual report notificati	on)
For further information concerning this matter, ple	
Nicole Parnell	949) 955-9585
Name of Person at (Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	randilassee, Fioritia 32314
Enclosed is a check for the following am	ount:
\$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 Town Cent	er H, LLC
2. (a) Principal office address of limited liability company	16740 Birkdale Commons Parkway
-[√] (<u>Note: MUST BE STREET ADDRESS</u>)	Suite 301
	Huntersville, NC 28078
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
(Note: MAII BET OST OFFICE BOA)	
8/29/2006	M06000004786
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:
Registered Agent:	Corporation Service Company
Registered Office Address:	1201 Hays Street
· ·	Tallahassee, FL 32301-2525
(b) Enter name of NEW Registered Agent and/or NEW	W Registered Office address:
NEW Registered Agent:	NRAI Services, Inc.
NEW Registered Office Address:	2731 Executive Park Drive
(MUST BE FLORIDA STREET ADDRESS)	Suite 4 Weston ,FL33331
	<u>Weston</u> ,FL <u>33331</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited (when we work wise provided in the articles of organization)
Signature of a member or authorized representative of a member	=
Jose Castellanos, Authorized Person	ora-
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 pr and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	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
address, Thereby confirm that the limited liability company	y has been notified in writing of this chänge.

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