170700000224

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PICK-UP WAIT MAIL		
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T. HAMPTON

JUN 15 2009

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Gemini Brandon 5, LLC	
Name of Lim	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Nicole Parnell Name of Person	
Name of Ferson	
Charles Baclet and Associates, In	c
Firm/Company	<u></u>
2875 Michelle Drive, Suite 100	
Address	
Irvine, CA 92606	
City/State and Zip Code	
pparpall@chaclet.com	
nparnell@cbaclet.com E-mail address: (to be used for future annual report notifi	cation)
For further information concerning this matter, please call:	
Nicole Parnell a	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

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 Brandon	5, LLC
2. (a) Principal office address of limited liability company	
(Note: MUST BE STREET ADDRESS)	Suite 301
	Huntersville, NC 28078
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
4/18/2007	M0700002240
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:	Dante A. Massaro
D i	32 Hannah Colo Drivo
Registered Office Address:	32 Hannah Cole Drive St. Augustine, FL 32080
(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 ,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 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 pre-	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization of STARY OF STATES.
comply with the appointment as registered agent and a comply with the provision and I am familiar with and accept the obligations of my po Chapter 608, F.S. Gr., if this document is being filed to me address, I hereby confirm that the similar liability compan	sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.
Signature of Registered Agent Louie Tamantini, Vice President	

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