M0700000255

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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUN 1 5 2009

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJ	ECT: Gemini Brandon 8, LLC	
	Name of L	Limited Liability Company
Dear	Sir or Madam:	
The e	nclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Pleas	e return all correspondence concerning	this matter to the following:
	Nicole Parnell	
	Name of Person	
	Charles Baclet and Associates,	Inc.
	Firm/Company	
	2875 Michelle Drive, Suite 10 Address	00
	Irvine, CA 92606 City/State and Zip Code	
ŀ	nparnell@cbaclet.com -mail address: (to be used for future annual report n	otification)
For fi	urther information concerning this matte	er, please call:
	Nicole Parnell	at (<u>949</u>) <u>955-9585</u>
	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 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
	Tallahassee, Florida 32301	Farianassee, Florida 32314
	Enclosed is a check for the following	ng 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 8	3, LLC
2. (a) Principal office address of limited liability company:	16740 Birkdale Commons Parkway
(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	M07000002255
3. Date of filing/registration in Florida	Document number
5. (a) Registered Agent and Registered Office shown on the	ne 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:	NRAI Services, Inc.
NEW Registered Office Address:	2731 Executive Park Drive
(MUST BE FLORIDA STREET ADDRESS)	Suite 4 Weston ,FL33331
	,r L 33331
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherworthe operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limical was/were authorized by an affirmative vote wise provided in the articles of organization?
Jose Castellanos, Authorized Person	STA D:
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or if this document is being filed to mer address, Lhereby confirm that the limited liability company Signature of Registered Agent Louie Tamantini, Vice President	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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