## 11/07000002563

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J. BRYAN

JUN 1 5 2009

**EXAMINER** 

## **COVER LETTER**

10:	Division of Corporations				
SUBJ		Limited	Liability	Company	
	Traine of	21111100	· Biaomiy	Company	
Dear S	ir or Madam:				
The er	closed Registered Agent/Registered	Office (	Change an	d fee(s) are submitted fo	or filing.
Please	return all correspondence concerning	this m	atter to the	e following:	
	Nicole Parnell				
	Name of Person				
	Charles Baclet and Associates	, Inc.			ii s
	Firm/Company				E G
	2875 Michelle Drive, Suite 1	00			9 JUN 12 PH 2: 49 SECRETARY OF STATE SECRETARY OF FLORID
	Address				部 字「
					FES
	Irvine, CA 92606				另至 去
	City/State and Zip Code				DE B
E-	nparnell@cbaclet.com	notificatio	on)		
For fu	rther information concerning this mat	ter, plea	ase call:		
	Nicole Parnell	at (	949 )	955-9585	
	Name of Person	\_		a Code & Daytime Telephone N	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314	
	Enclosed is a check for the following	ng amo	ount:		
	<b>√</b> \$25 Filing Fee		\$55 1	Filing Fee & Certified C	ору

## 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 1			
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)	SECOND TO SECOND		
5/2/2007	M07000002563		
	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 <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW Registered Agent</u> :	/ Registered Office address: NRAI Services, Inc.		
<u> </u>	2731 Executive Park Drive		
	Suite 4		
	Weston ,FL33331		
	weston ,FL 33331  www of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote		
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 identicability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.	weston ,FL 33331  www of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote		
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 identically company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member.	weston ,FL 33331  www of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote		
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 otherwor the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member.  Jose Castellanos, Authorized Person	weston ,FL33331  The system of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization		