1107000000000003695

(Re	questor's Name)			
(Ad	dress)			
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·		
Certified Copies	· Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



300157053503

06/12/09--01054--001 **2600.00

99 JUN 12 PH 2: 49
SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE
ORIGINAL STATE
ORIGI

J. BRYAN

JUN 15 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Gemini Brandon 14, LLC					
Name o	of Limited	d Liabil	lity Co	mpany	
Dear Sir or Madam:					
The enclosed Registered Agent/Registered	d Office (Changa	and fa	oo(s) are submitted for filing	,
The enclosed Registered Agent/Registered	1 Office (Change	and ic	c(s) are submitted for ming	•
Please return all correspondence concernia	ng this m	atter to	the fo	llowing:	
Nicole Parnell			_		
Name of Person					
				75 S	9 JUN 12 PH 2: 49
Charles Baclet and Associate	<u>∍s, Inc.</u>				= "
Firm/Company				芸門	<u> </u>
				55	70 1
2875 Michelle Drive, Suite	100			ri d	20 1
Address	100		_	-17	
				5	
				32	語 6
Irvine, CA 92606				**************************************	*
City/State and Zip Code					
E-mail address: (to be used for future annual repo	l et notificatie	on)			
E-man address, (to be used for fatale annual repo	ii nomicane	J.I.,			
For further information concerning this m	atter, ple	ase call	l:		
Nicole Parnell	at (949)	955-9585	
Name of Person			Area Co	de & Daytime Telephone Number	
STREET/COURIER ADDRESS:		MA	AILING	G 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 follow	ving amo	ount:			
\$25 Filing Fee		€ 4	S Filir	o 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	14, LLC			
2. (a) Principal office address of limited liability company	y: 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)				
5/7/2007	M07000002695			
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			
Registered Office Address:	32 Hannah Cole Drive St. Augustine, FL 32080			
(b) Enter name of NEW Registered Agent and/or NEW NEW Registered Agent:	NRAI Services, Inc.			
NEW Registered Agent:	NRAI Services, Inc.			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2731 Executive Park Drive Suite 4			
	Weston ,FL 33331			
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 identiability 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	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote			
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 pro 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 bereby confirm that the limited liability compan				

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

Signature of Registered Agent Louie Tamantini, Vice President