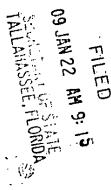
## M0800003198

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B. KOHR

JAN 23 2009

**EXAMINER** 



ACCOUNT NO. : 072100000032

REFERENCE :

865599

7527156

AUTHORIZATION

COST LIMIT

ORDER DATE: January 21, 2009

ORDER TIME : 12:24 PM

ORDER NO. : 865599-105

CUSTOMER NO: 7527156

## CHANGE OF AGENT

NAME:

GEMINI PROPERTY MANAGEMENT,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX \_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret

EXAMINER'S INITIALS:

## 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. Nat	ne of the limited liability company: GEMINI	PROPERTY MANAGEMI	ENT, LLC
2. (a)	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany: 16740 Birkdale Com Suite 301 Huntersville, NC 2807	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		09 7
07/0	8/2008	M08000003198	LED ASSEE
3. Dat	e of filing/registration in Florida	4. Document number	F. 9.
5. (a)	Registered Agent and Registered Office shown	on the records of the Florida De	pt. of tate:
	Registered Agent:	Dante A. Massaro	W. T.
	Registered Office Address:	32 Hannah Cole Drive St. Augustine, FL 3208	0
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address Corporation Service Co	
NEW Registered Office Address:	1201 Hays Street		
(MUST BE FLORIDA STREET ADDRESS)		Tallahassee	,FL 32301
that af office hereby liabilit limited	imited liability company is not organized under ter the change or changes are made, the Florida sof the registered agent will be identical. Or, in to confirmed that the change(s) was/were authorized company or as otherwise provided in the artical liability company.  The of a member or authorized representative of a member)	street address of the registered of he case of a Florida limited liabi	fice and the business lity company, it is
	e Massaro or typed name of signee)		
I here comply am fan F.S. C confirm By:	by accept the appointment as registered agent a v with the provisions of all statutes relative to th miliar with and accept the obligations of my posi or, if this document is being filed to merely refle on that the limited liability company has been not prooration Scrvice Company.	nd agree to act in this capacity. e proper and complete performa tion as registered agent as provi et a change in the registered offic ified in writing of this change.	I further agree to nce of my duties, and I ded for in Chapter 608 ce address, I hereby

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