

LO3000047798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

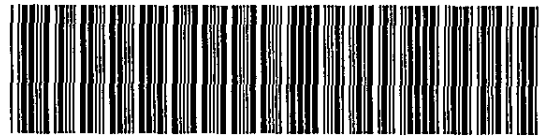
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bravo Properties, LLC
(Name of corporation)

DOCUMENT NUMBER: L03000047798

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Steven K. Baird
(Name of contact person)

Steven K. Baird, P.A.
(Firm/Company)

5981 NE 6th Avenue
(Address)

Miami, Florida 33137
(City/state and zip code)

For further information concerning this matter, please call:

Steven K. Baird at (305) 757-6755
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RECEIVED
DIVISION OF CORPORATIONS
MAY 29 2004

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. The name of the limited liability company is: Bravo Properties, LLC
2. The mailing address of the limited liability company is : 8435 SW 81 Terrace, Miami, FL 33143

11/25/03 L03000047798
3. Date of filing/registration in Florida 4. Document number

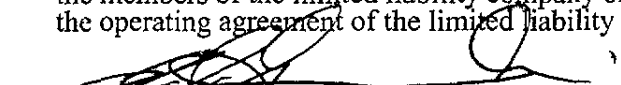
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Garmendia, Magali MGR
Name
8435 SW 81 Terrace
Address
Miami, Florida 33143
City, State and Zip

6. The name and address of the new registered agent and/or office:

Steven K. Baird, P.A.
Name
5981 NE 6th Avenue
Florida street address (P.O. Box NOT acceptable)
Miami, FL 33137
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.




(Signature of a member or authorized representative of a member)

Magali Garmendia, Managing Member

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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