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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : J L HOFMANN & ASSOCIATES, P.A.

Account Number : I19990000022 Phone : (305)666-0024 Fax Number : (305)666-0028

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REGISTERED AGENT CHANGE DBH PROPERTIES, LTD.

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LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT. OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	DBH PROP				
,	Same of Limited Partnership or Li	mited Liability Lir	nited Partnership		
2	July 2, 2004	3. <u> </u>	A0400001162		
Date of fili	ng/registration in Florida		Florida document number		
4. The name of the Department of State	registered agent and the registered	l office address as	shown on the rece	rds of the Florida	
	United States Regi	stered Agents	s, Inc.		
	Na	me			
	420 S. Dixie Hig	hway, Suite 4	4B		
		ress			
	Coral Gable	s, FL 33146		- C	
		e and Zip			
5. The name and Fl	orida street address of the new reg	istered agent and	or office:		
	Na Na	me			
	0200 C. Dadalan		200		
	9300 S. Dadelan- Florida street address (F			:	
	·	.O. Bux not accep			
	Miami	FL_	33156		
	City, Stat	e and Zip			
6. Such change(s) is	s/are effective when filed by the F	lorida Department	of State.		
Signature of Genera	l Partner				
comply with the pro	0	ne proper and com	plete performance	rther agree to of my duties,	
orgitature of Registe	acu Agen				
Filing Fee: Certified Copy	\$35.00 (optional): \$52.50				