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(Requestor's Name) (Address) (Address)	2004 APR 29 P 1:27 SECRETARY OF STATEA 100033437451
(City/State/Zip/Phone #)	04/29/0401053018 **375.09
Special Instructions to Filing Officer: Office Use Only	

MAM ORLANDO ST. PETERSBURG TALLAHASSEE TAMPA ARLTON FIELDS WEST PALM BEACH ATTORNEYS AT LAW 4000 International Place 100 S.E. Second Street April 270320000 29 P 1:27 Miami, Florida 33131-9101 P.O. Box 019101 Miami, Florida 33131-9101 TELEST CENTRE 305 530 0050 305.530.0055 fax www.carltonfields.com Florida Secretary of State **VIA OVERNIGHT COURIER Division of Corporations** 409 East Gaines Street

Re: CHANGE OF REGISTERED AGENT

Dear Sir/Madam:

Tallahassee, FL 32399

Enclosed please find a Statement of Change of Registered Agent for the following entities:

- Bengo Ontivero Holdings, LLC
- Bengo 8 Beach Property Management, LLC
- Ontivero 5 Beach Property Management, LLC
- 353 Hil-Del Property Management, LLC
- 2363 Hil-Del Property Management, LLC
- 2929 Del-Hil Property Management, LLC
- 34 Del-Hil Property Management, LLC
- 360 Del-Hil Property Management, LLC
- 330 Hil-Del Property Management,, LLC
- 50 Del-Hill Property Management, LLC
- 340 Del-Hill Property Management, LLC
- 325 Del-Hill Property Management, LLC
- 335 Del-Hill Property Management, LLC
- 470 Del-Hill Property Management, LLC
- 2200 Del-Hill Property Management, LLC

Also enclosed is a check in the amount of \$375.00 to cover the filing fees for same. Please process the statements at your earliest convenience and kindly return a date-stamped copy of this letter to my attention (a self-addressed envelope is provided for your convenience).

Thank you for your assistance.

Sincerely,

Annette Deleon Corporate Paralegal

Enclosures

cc: Hilda Bengochea MIA#2306543 i

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, for 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: 34 Del-Hil Property Management 24 C 1:27

2. The mailing address of the limited liability company is : 366 SW 22nd Road WARY OF SIME

Miami, FL 33129

11/26/2001

3. Date of filing/registration in Florida

L01000020684 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:

CORPCO, INC. Name 2699 S. Bayshore Drive, 7th Floor Address

Miami, FL 33129

City, State and Zip

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

Miami

Delia Ontivero

366 SW 22nd Road

Florida street address (P.O. Box NOT acceptable)

_{FL} 33129

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.

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

Delia Ontivero, Authorized Representative

(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

FILING FEE: \$25.00