

L02000004154

(Requestor's Name)

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(City/State/Zip/Phone #)

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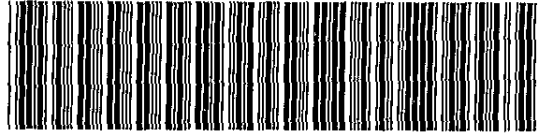
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2004 DEC 14 PM 3:25

FILED

J. BRYAN DEC 22 2004

VILLAZZO
LUXURY VILLA MANAGEMENT

DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

FILED
2004 DEC 14 PM 3:25
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
December 10, 2004

Re: Statements of Change of Registered Agent

Dear Sir/Madam,

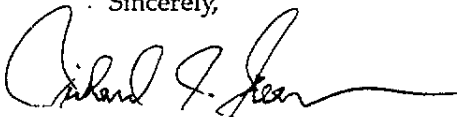
In accordance with Section 608.416 of the Florida Statutes, we submit herewith for filing duly executed Statements of Change of Registered Agent for the following Florida Limited Liability Companies:

1. VILLAZZO, LLC
2. PORTOFINO PARTNER, LLC
3. PORTOFINO PENTHOUSE II, LLC
4. 440 SOUTH HIBISCUS, LLC
5. 10 PALM LLC

We also enclose herewith a check made payable to the Florida Division of Corporations in the amount of \$125.00, representing a filing fee of \$25.00 per Statement of Change hereby filed.

Should you have any questions regarding this filing, please address them to the undersigned by phone or by email (richard.freeman@villazzo.com).

Sincerely,



Richard A. Freeman, Esq.
info@villazzo.com
Villazzo LLC

**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: PORTOFINO PENTHOUSE II, LLC

2. The mailing address of the limited liability company is : C/O VILLAZZO, LLC,
119 WASHINGTON AVENUE, SUITE 504, MIAMI BEACH, FL 33139

FEBRUARY 15, 2002

L02000004154

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:

KRINZMAN, ALAN E.

Name

2601 S. BAYSHORE DR., SUITE 1600

Address

MIAMI, FL 33133

City, State and Zip

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

RICHARD A. FREEMAN, ESQ.

Name

119 WASHINGTON AVENUE, SUITE 504

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

MIAMI BEACH, FL 33139

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)

CHRISTIAN JAGODZINSKI

(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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