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ATTORNEYS AT LAW

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April 27, 2004

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4000 International Place 100 S.E. Second Street Miami, Florida 33131-9101 P.O. Box 019101 Miami, Florida 33131-9101

305.530.0050 305.530.0055 fax www.carltonfields.com

VIA OVERNIGHT COURIER

Florida Secretary of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re:

CHANGE OF REGISTERED AGENT

Dear Sir/Madam:

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.

7

Annette Deleon

Corporate Paralegal

Enclosures

cc: Hilda Bengochea

MIA#2306543.1

## 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:	Bengo 8 Beach Property N	Management, LLC
2. The mailing address of t	he limited liability cor	mpany is: 366 SW 22nd Ro	oad .
Miami, FL 33129			
05/02/2002		L02000011024	<u> </u>
3. Date of filing/registration	n in Florida	4. Document nun	nber
Florida Department of St	ed agent and the regist tate: CORPCO, INC.	ered office address as shown o	on the records of the
-	2699 S. Bayshore D	Name rive, 7th Floor Address	FILED 112
-	Miami, FL 33129	State and Zip	A 29
6. The name and address of	f the new registered ag	ent and/or office:	THE TO
	Delia Ontivero		
_	366 SW 22nd Road	lame	270 P
_	Florida street address	(P.O. Box NOT acceptable)	
1	Miami	<sub>FL</sub> 33129	
_	City, St	ate and Zip	
confirmed that after the cha and the business office of the liability company, it is here	inge or changes are ma he registered agent will by confirmed that the liability company or a	nder the laws of the State of Fade, the Florida street address of the identical. Or, in the case change(s) was/were authorized so otherwise provided in the armany.	of the registered office of a Florida limited I by an affirmative vote of
(Signature of a member or authorize	ed representative of a member	)	
Delia Ontivero, Authoriz	ed Representative		
(Printed or typed name of signee)			
I hereby accept the appoin comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm to	tment as registered ag of all statutes relative accept the obligations is document is being finat the limited liability	ent and agree to act in this ca to the proper and complete pe of my position as registered a led to merely reflect a change company has been notified in	pacity. I further agree to erformance of my duties, igent as provided for in in the registered office writing of this change.

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

INHS18(10/99)

(Signature of Registered Agent)

**FILING FEE: \$25.00**