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April 27, 2004
SECRETARY OF STATE
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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.

Sincerely,

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:	335 Del-Hil Property Management, LLC
2. The mailing address of the limited liability cor	
Miami, FL 33129	
05/02/2002	L02000011025
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the regist Florida Department of State: CORPCO, INC.	ered office address as shown on the records of the
2699 S. Bayshore D	Name Drive, 7th Floor
Miami, FL 33129	Address State and Zip sent and/or office:
6. The name and address of the new registered ag	one and or other.
Delia Ontivero	
366 SW 22nd Road	Name 5
Florida street address	(P.O. Box NOT acceptable)
Miami	_{FL} 33129
City, St	tate and Zip
and the business office of the registered agent will liability company, it is hereby confirmed that the	ade, the Florida street address of the registered office III be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote of as otherwise provided in the articles of organization or ompany.
Delia Ontivero, Authorized Representative	
(Printed or typed name of signee)	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being faddress, I hereby confirm that the limited liability (Signature of Registered Agent)	gent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, s of my position as registered agent as provided for in itself to merely reflect a change in the registered office y company has been notified in writing of this change.

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

FILING FEE: \$25.00