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April 27, 2004

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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 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, 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.

agent, or both, in the Stat	e oj r tortaa.						
1. The name of the limite	ed liability company is:	2200 Del-	Hil Property M	lanager	ment,	LLC	
2. The mailing address of	f the limited liability co	ompany is : 🖄	366 SW 22nd	Road			
Miami, FL 33129							
05/02/2002			L02000011027				
3. Date of filing/registration in Florida			4. Document number				
5. The name of the register Florida Department of		stered office a	address as show	n on the	record	is of the	
	2699 S. Bayshore [Name Drive, 7th Fl	loor				
		Address					
	Miami, FL 33129	State and Zi	n				
6. The name and address	•	'	•				
o. The name and address		gent and/or o	TIRCE.	S)(
	Delia Ontivero		<u></u>	17. 103	ZODY API		
	Name 366 SW 22nd Road				A	# #	
	Florida street address	s (P.O. Box I	NOT acceptable)))	29		
	Miami	FL 33129	3	-5	T	Ö	
	City, S	State and Zip			=		
If the limited liability conconfirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement of the limited liability concentration of the limited liability company.	hange or changes are managed the registered agent with the registered agent with the reby confirmed that the red liability company or a second control of the results of the results are results.	nade, the Flor ill be identica change(s) w as otherwise	rida street addres al. Or, in the cas vas/were authori	ss of the se of a F zed by a	regist Florida an affir	ered office limited mative vote of	
(Signature of a member or author	ized representative of a member	er)					
Delia Ontivero, Author	ized Representative						
(Printed or typed name of signee)							
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if a address, I hereby confirm	intment as registered as of all statutes relative as of all statutes relative ad accept the obligation this document is being to that the limited liability.	gent and agr e to the prop is of my posit filed to mere ty company h	ee to act in this er and complete tion as registere ly reflect a chan ias been notified	capacit perforn d agent ige in th in writ	y. I fun nance as pro e regis ing of	ther agree to of my duties, wided for in stered office this change.	

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

(Signature of Registered Agent)