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April 27g2004 ARY OF STATE TALLAHASSEE, FLORIDA

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.

Sipcerely,

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 president agent, or both, in the State of Florida.

agent, or both, in the State of Florida.	
1. The name of the limited liability con	npany is: 470 Del-Hil Property Management, LLC
	ability company is: 366 SW 22nd Road
Miami, FL 33129	THE CASE OF STATE
05/02/2002	L02000011028
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and Florida Department of State: CORPCO,	the registered office address as shown on the records of the INC.
2699 S. Ba	Name yshore Drive, 7th Floor
Miami, FL	Address 33129
<del></del>	City, State and Zip
6. The name and address of the new reg	istered agent and/or office:
Delia Ontiv	ero
366 SW 22	Name nd Road
Florida stre	et address (P.O. Box NOT acceptable)
Miami	FL 33129
	City, State and Zip
confirmed that after the change or chan and the business office of the registered liability company, it is hereby confirme the members of the limited liability conthe operating agreement of the limited liability conthe operating agreement of the limited liability continued.	
(Signature of a member or authorized representative	of a member)
Delia Ontivero, Authorized Represe	entative
•	ictared agent and agree to get in this equacity. I further agree to
comply with the provisions of all statute and I am familiar with and accept the Chapter 608, F.S. Or, if this document address, I hereby confirm that the limit	istered agent and agree to act in this capacity. I further agree to es relative to the proper and complete performance of my duties, bligations of my position as registered agent as provided for in is being filed to merely reflect a change in the registered office ed liability company has been notified in writing of this change.

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

INH\$18(10.799)

(Signature of Registered Agent)