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(Address)		
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PICK-UP WAIT MAIL		
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2001 AUG ZU P 3: U.T SECRETARY OF STATE ALLAHASSEE, FLORID.

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CORPORATE PRO (Name of	of Limited Liability Company)	_
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for	filing.
Please return all correspondence concerni	ing this matter to the following:	
ZAIDA GONZALES (Name of Person)	Ś	
CORPORATE PROPERTY (Firm/Company)	HOLDING UC	2001
12441 S.W. 99 ST	ARETARY C	AUG 24
M JAMI, FRORMA (City/State and Zip Code)	FSTATE FLORIDA	FILED 2001 AUG 24 P 3: 43
For further information concerning this m	natter, please call:	
ZAIDA G-ONZALES (Name of Person)	at (305) 951-2274 (Area Code & Daytime Tele	phone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Cop	ру

"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: CORPORATE PROPERTY HOLD ING. LCC.
2. The mailing address of the limited liability company is: 2510 N.W. 97 AUE. #100.
DOOM FLORIDA 3317)
DORAL FLORIDA 33172 11-19-2003 L03000045849
3. Date of filing/registration in Florida 4. Document number
1/-/9-2003 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: J. DAUTI) GONZALOS Name 12441 S.w. 99 ST. Address MIAMI FLORIDA 33/86 ALES City, State and Zip ALES Address SEE FLORIDA ASSET Address ALES FLORIDA ASSET DEPARTMENT FLORIDA A
Name
12441 S.W. 99 ST.
Address
City, State and Zip
6. The name and address of the new registered agent and/or office:
ZAIDA GONZALES
12441 S.W. Name 99 ST
Florida street address (P.O. Box NOT acceptable)
MIAMI FL 33/86 City. State and Zip
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)
ZAIDA GUNZALES
(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 auties, 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.
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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