## L090000 48287

(Requ	uestor's Name)	
(Addi	ress)	
(Addı	ress)	
(City/	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nan	me)
(Doc	ument Number)	
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FEB 10 2016 J SHIVERS



## COVER LETTER

TO: Registration Section Division of Corporations			
CTS PROPERTY HO	LDINGS LLC		
	ame of Limited Liability	Company	
Dear Sir or Madam:			
The enclosed Statement of Authority and	fee(s) are submitted for fi	ling.	
Please return all correspondence concernit	ng this matter to the follow	wing:	
JAMES MARX			
Name of Person		<del></del>	
MARX ROSENTHAL PLLC			
Firm/Company		<del></del>	
1 SE 3RD AVENUE, SUITE 29	00		
Address		<del></del>	
MIAMI, FL 33131			
City/State and Zip Code	:	<del></del>	
JAMES@MARXROSENTHAL.	СОМ		
E-mail address: (to be used for f	uture annual report notific	cation)	
For further information concerning this m	natter, please call:		
JAMES MARX	305	577-0276	
Name of Person	Area C	ode Daytime Telephone Number	
STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	Reg Div P.O	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314	
Tallahassee, Florida 32301			

CR2E138 (2/14)

TO:

## STATEMENT OF AUTHORITY

Pursuant to section 60, authority:	5.0302(1). Florida Statutes, this limited liability company submits the following statement of
FIRST: The name of	the limited liability company is: CTS PROPERTY HOLDINGS LLC
SECOND: The Florid	da Document Number of the limited liability company is: L0900048287
THIRD: The street a	ddress of the limited liability company's principal office is: ST SUNRISE BLVD, SUITE 207
PLANTAT	TION, FL 33322
	g address of the limited liability company's principal office is: ST SUNRISE BLVD, SUITE 207
PLANTA	TION, FL 33322
position of a person in person on the following	Granted to:
b.	No authority granted to: Shimon Mazar and Tom Huslon are NOT authorized to transfer or encumber Real Property without the approval of Cheryl White.
•	Granted to:
b.	No authority granted to: Shimon Mazar and Tom Huston are not authozied to enter into any Contract for the Company without the approval of Cheryl White.
Seul to	CHERYL WHITE
Signature of authoriz	red representative  Typed or printed name of signature  Filing Fee: \$25.00  Certified Copy: \$30.00 (optional)

CR2E138 (2/14)