

209 0000 87397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

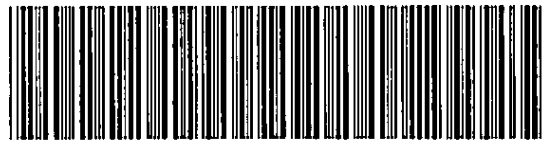
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/15/21--01019--012 \*\*25.00

**FILED**  
2021 JUN 15 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FL

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 3050 AVENTURA OWNER, LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mr. Steven I. Montague

\_\_\_\_\_  
Name of Person

c/o JSRE Realty LLC

\_\_\_\_\_  
Firm/Company

550 5th Avenue, 4th Floor

\_\_\_\_\_  
Address

New York, NY 10036

\_\_\_\_\_  
City/State and Zip Code

Steve@EsquireManagement.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven I. Montague

212

756-8094

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

## STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

**FIRST:** The name of the company is 3050 AVENTURA OWNER, LLC, a Limited Liability Company established under the laws of the State of Florida, USA.

**SECOND:** The Florida Document Number of the limited liability company is: L09000087397.

**THIRD:** The street address of the limited liability company's principal office is:

c/o Safra National Bank of New York, Managing Member  
Attn: Carlos Bertaco, SVP and Controller  
546 Fifth Avenue, New York, NY 10036

The mailing address of the limited liability company's principal office is:

c/o Safra National Bank of New York, Managing Member  
Attn: Carlos Bertaco, SVP and Controller  
546 Fifth Avenue, New York, NY 10036

**FOURTH:** This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferor, manager, officer or otherwise or to a specific person on the following:

3050 AVENTURA OWNER, LLC hereby authorizes, Steven Montague, ("Representative"), to perform on behalf of 3050 AVENTURA, LLC in the Miami-Dade County, Florida, specific activities:

1. To cause this filing of a Statement of Authority pursuant to section 605.0302, Florida Statutes, to register Representative as an agent with authority for 3050 AVENTURA OWNER, LLC as more fully set forth herein.
2. To bind 3050 AVENTURA OWNER, LLC for contracts pertaining to construction, mechanics, demolition, improvements to real property and related activities.
3. To bind and represent 3050 AVENTURA OWNER, LLC for all purposes relating to land-use, zoning, and permitting concerns.
4. Interact with and respond to relevant regulatory authorities and all other relevant governmental agencies and departments.
5. Interact with and manage all contractors providing goods and/or services to 3050 AVENTURA OWNER, LLC properties.
6. This authority shall **not** include power to sell, transfer, lease, or encumber real property.

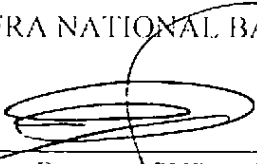
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This Statement of Authority shall be valid from the date of execution below and shall remain in effect unless revoked by 3050 AVENTURA OWNER, LLC and cannot be transferred by the Representative to any other person or entity.

Signature of Authorized Representative:

3050 AVENTURA OWNER, LLC

By: SAFRA NATIONAL BANK OF NEW YORK, N.A., Managing Member



By: ~~Carlos Bertaco~~, SVP and Controller

Dated: 6/3/21


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TALLAHASSEE, FL

Notarization:

STATE OF: NEW YORK  
COUNTY OF: NEW YORK

The foregoing instrument was acknowledged before me this 3<sup>rd</sup> day of June 2021, by Carlos Bertaco whom is personally known to me.

SEAL:  
JOSEPHINE VELAZQUEZ  
Notary Public, State of New York  
No. 01VE4985191  
Qualified in Queens County  
Certificate Filed in New York County  
Commission Expires Aug. 12, 2021

  
Notary Public, State of New York

My Commission Expires: 8/12/2024