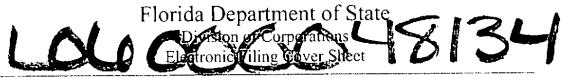
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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JECK, HARRIS, RAYNOR & JONES, P.A.

Account Number : I20000000210 : (561)746-1002 : (561)775-0270 Fax Number

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Page: 2 of 2

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STATEMENT OF AUTHORITY

Pursuant authority	to section (505.0302(1), Florida	Statutes, this limited	liability company si	ubmits the following	statemen	t of
FIRST:	The name	of the limited liabilit	y company is:	SE FLORIDA AVI	ENUE, LLC		
SECON	D: The Flo	rida Document Num	ber of the limited liab	ility company is:	06000048134		
THIRD:		address of the limite	ed liability company's SOUND, FL 33455	principal office is:			
		ng address of the limridge Road. HOBE S	nited liability company	y's principal office i	is:		
osition o erson on	of a person the follow	in a company, wheth ing: secute an instrument Granted to: Janet P	grants or sets limitation for as a member, transform transferring real proper Preman to execute all c	ferce, manager, officerty held in the name	Il persons having the cer or otherwise or t e of the company.	estatus or o a specif	ic
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2	2, Mayer a.	onter into other transactions of $\frac{N/A}{A}$	ctions on behalf of, or		r bind, the company	PM 2: 24	03 0 0 0 0 0 0
	ъ.	No authority grante	ed to: N/A				
8	Del	Mohi		11765 SE	GT., LLC, a Florida FLORIDA AVENU Modica, Manager		ability, Manage
ignature	of authoriz	ed representative	Filing Fee: 5 Certified Copy: 5	\$25.00	printed name of sig	nature	