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COVER LETTER

TO: Registration Section Division of Corporations		
S & I Properties, 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:		
Victor H De Yurre		
Name of Person		
Law Offices of Victor H De Yurre		
Firm/Company		
6780 Coral Way		
Address		
Miami, Florida 33155		
City/State and Zip Code		
deyurre@aol.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Victor H De Yurre at () 305 3739194 Name of Person Area Code Daytime Telephone Number		
Name of Person Area Code Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

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 limited liability company is: S & I Properties, LLC SECOND: The Florida Document Number of the limited liability company is: L00000008913 **THIRD:** The street address of the limited liability company's principal office is: 7600 Red Road, Suite 124 South Miami, Florida 33143 The mailing address of the limited liability company's principal office is: 7600 Red Road, Suite 124 South Miami, Florida 33143 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, transferee, manager, officer or otherwise or to a specific person on the following: 1. May execute an instrument transferring real property held in the name of the company. Granted to:_Steven Halegua No authority granted to: ____ Halegua May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: __Steven Halegua No authority granted to: _____ Steven Halegua Typed or printed name of signature Signature of authorized representative \$25.00 Filing Fee:

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)