02000023163

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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06/12/15--01025--027 **30.00

JUN 15 2015

COVER LETTER

TO: Registration Section Division of Corporations			
Oricia Properties, LLC SUBJECT:	·		
	imited Liability Comp	oany	
Dear Sir or Madam:			
The enclosed Statement of Authority and fee(s) are	e submitted for filing.		
Please return all correspondence concerning this m	natter 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	<u>-</u> -		
deyurre@aol.com			
E-mail address: (to be used for future ann	nual report notification)	
For further information concerning this matter, ple	ease call:		
Victor H De Yurre	305	3739194	
Name of Person	Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations	Division -	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

authority	:	Oricia Properties, LLC
FIRST:	The name of the limited liability company is:	Choic Frepolitios, 220
SECON	D: The Florida Document Number of the limit	ed liability company is: L02000023163
THIRD:	The street address of the limited liability com 7600 Red Road, Suite 124	pany's principal office is:
	South Miami, Florida 33143	Jan 12
	The mailing address of the limited liability co	pany's principal office is:
	South Miami, Florida 33143	
person o	n the following: 1. May execute an instrument transferring real a. Granted to: Steven Halegua	al property held in the name of the company.
	b. No authority granted to: Ino Ha	alegua
	May enter into other transactions on beha a. Granted to: Steven Halegu	If of, or otherwise act for or bind, the company.
	b. No authority granted to:	alegua
	V	Steven Halegua
Signatur	e of authorized representative Filing Fee	Typed or printed name of signature :: \$25.00 Copy: \$30.00 (optional)