## 107000006321

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## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE		, LLC Limited Liability Cor	npany
Dear S	ir or Madam:		
The en	closed Statement of Authority and fee(s) ar	e submitted for filing	1
	return all correspondence concerning this n		
Elsa	Salcedo or Jeanne Fuentes  Name of Person		_
<u>Elite</u>	Company Management LLC Firm/Company		_
345 F	Romano Avenue Address		_
<u>Coral</u>	Gables, FL 33134 City/State and Zip Code		_
<u>esalc</u>	edo@companyrenewal.com  E-mail address: (to be used for future and	nual report notification	on)
For fur	ther information concerning this matter, ple	ease call:	
Elsa	Salcedo or Jeanne Fuentes Name of Person	at ( <u>305</u> Area Code	
	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 authority	to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of $\alpha$	
FIRST:	The name of the limited liability company is: Island Boulevard Holdings, LLC	
SECON	D: The Florida Document Number of the limited liability company is: L0700006321	
THIRD:	: The street address of the limited liability company's principal office is:  c/o Elite Company Management	
	345 Romano Avenue	
	Coral Gables, Florida 33134	
	Coral Gables, Florida 33134  The mailing address of the limited liability company's principal office is:  c/o Elite Company Management	
	PO BOX 141107	
	PO BOX 141107  Coral Gables, Florida 33114  This stratement of authority grants or sets limitations of authority on all persons having the status or	
position of person of	of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific in the following:  1. May execute an instrument transferring real property held in the name of the company.	
	a. Granted to: Gina Sacal Auriolsky (can act independently)	
	Vivian Auriolsky Navarrete (can act only with the prior written consent of Gina Sacal Auri	olsky
	b. No authority granted to:	
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.	
	a. Granted to: Gina Sacal Auriolsky (can act independently)	
	Vivian Auriolsky Navarrete(can act only with the prior written consent of Gina Sacal Auri	olsky)
	b. No authority granted to:	
	Gina Sacal Auriolsky	
Signature	Filing Fee: \$25.00  Certified Copy: \$30.00 (optional)	