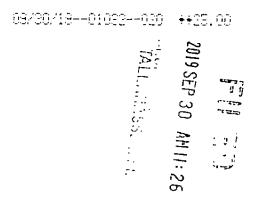
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## **COVER LETTER**

TO: Registration Section Division of Corporations				
Adrimar Investments, LLC SUBJECT:				
	of Limited Liability Com	pany		
Dear Sir or Madam:				
The enclosed Statement of Authority and fee(s)	are submitted for filing.			
Please return all correspondence concerning this	s matter to the following	:		
Jose J. Leonardo				
Name of Person	· · · · · · · · · · · · · · · · · · ·			
Law Offices of Jose J. Leonardo, Es	sq.			
Firm/Company	· · · · · · · · · · · · · · · · · · ·			
500 S. Dixie Highway, Suite 204				
Address	_			
Coral Gables, FL 33146				
City/State and Zip Code				
jose.leonardo@jleonardolaw.com				
E-mail address: (to be used for future a	annual report notification	)		
For further information concerning this matter,	please call;			
Jose J. Leonardo	305	275-9177		
Name of Person	Area Code	Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	Registrati Division o P.O. Box	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

Tallahassee, Florida 32314

Tallahassee, Florida 32301

## STATEMENT OF AUTHORITY

authority	y:	05.0302(1), Florida Statutes, this limited liability company submits the	: following	statement	. of
FIRST:	The name of	of the limited liability company is: Adrimar Investments, LLC			
SECON	D: The Flor	rida Document Number of the limited liability company is: L0700	004968	3.7	
THIRD:		address of the limited liability company's principal office is: DIXIE HIGHWAY, #486, CORAL GABLES, FL 33146			
	The maili	ng address of the limited liability company's principal office is:	TALLAHASAL	2019 SEP 30	£.;
	1172 S.	DIXIE HIGHWAY, CORAL GABLES, FL 33146	<del>1</del>	AM 11: 2	: 11 ; id
position :	of a person in the follow:	tement of authority grants or sets limitations of authority on all persons in a company, whether as a member, transferee, manager, officer or othing:  ecute an instrument transferring real property held in the name of the c	erwise or to	status or	
	<b>a</b> .	Granted to:			
	b.	No authority granted to:			
	2. May er a,	Granted to: Juan Angel Bueso, solely to enter for the purchase and sale of fuel oil.			racts
JAL	b.	No authority granted to: take any action(s) other than as granted in 2(a) above	/e.		
	Don	JVAN	ANGE	L BUE	so
Signature	e of authoriz	ed representative  Filing Fee: \$25.00  Certified Copy: \$30.00 (optional)	iame of sig	nature	

CR2E138 (2/14)