

LO7000069258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

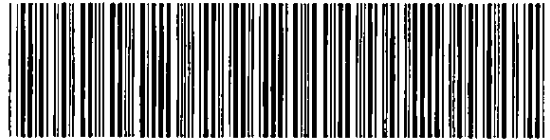
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
NOV - 5

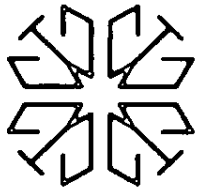
Office Use Only



100437775631

10/18/24--01006--012 \*\*25.00

2024 OCT 13 PM 6:13



**THE ONE**  
— L E G A L —

Elsa M. Salcedo

Director of Operations and Paralegal  
2525 Ponce de Leon Blvd, Suite # 300  
Coral Gables, Florida 33134  
Phone: 305-444-8431  
Fax: 305-508-6142  
esalcedo@theonelegal.com

October 16, 2024

***Via Federal Express***

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N Monroe Street, Suite 810  
Tallahassee, Florida 32303

Re: Filing of Statement of Authority

Dear Sir or Madam,

Enclosed herewith please find a completed Statement of Authority and a check in the amount of \$25.00, made payable to Florida Department of State representing the Statement of Authority filing fee for each of the following companies:

1. Jade St. Tropez Holdings, LLC
2. Island Boulevard Holdings, LLC
3. 2204 Sayan Holdings, LLC

Should you have any questions, please feel free to contact me.

Sincerely,

Elsa M. Salcedo  
Director of Operations and Paralegal

/ems

Enclosures as listed

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Jade St. Tropez Holdings, 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:

Elsa Salcedo or Jeanne Fuentes  
Name of Person

Elite Company Management LLC  
Firm/Company

345 Romano Avenue  
Address

Coral Gables, FL 33134  
City/State and Zip Code

esalcedo@companyrenewal.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elsa Salcedo or Jeanne Fuentes at ( 305 ) 570-0017  
Name of Person Area Code Daytime Telephone Number

**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 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: Jade St. Tropez Holdings, LLC

SECOND: The Florida Document Number of the limited liability company is: L07000069258

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

The mailing address of the limited liability company's principal office is:

c/o Elite Company Management

PO BOX 141107

Coral Gables, Florida 33114

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.

a. Granted to: Gina Sacal Auriolsky (can act independently)

Vivian Auriolsky Navarrete (can act only with the prior written consent of Gina Sacal Auriolsky)

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 Auriolsky)

b. No authority granted to: \_\_\_\_\_

DocuSigned by:



Signature of authorized representative

Gina Sacal Auriolsky

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)