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| (Requestor's Name) | | |
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M. MILLIGAN EXAMINER

JAN 3 0 2015



MIAMI 2699 S. Bayshore Drive SEVENTH FLOOR MIAMI, FL 33133-5408

3O5-856-2444 3O5-285-9227 fax

www.katzbarron.com

January 6, 2015

Via U.S. Mail

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

RE: Filing of Statement of Authority / Infinity The Oaks, LLC

To Whom It May Concern:

Enclosed please find an original Statement of Authority which we are submitting for filing. We request that you return a certified copy of the filed Statement of Authority to us in the enclosed self-addressed stamped envelope.

Enclosed is one check in the amount of \$330.00, \$55.00 of which relates to the above-referenced entity, which covers the filing fee and certified copy fee for this request and the other five Statements of Authority which are enclosed herein.

If you have any questions, please contact me at (305) 856-2444 Ext. 129 or via email at axc@katzbarron.com.

Very truly yours,

KATZ BARRON SQUITERO FAUST

Arlet Cruz Legal Assistant

Enclosure

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STATEMENT OF AUTHORITY

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STATE OF FLORIDA) ss: COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned authority, personally appeared IGHAL GOLDFARB, as President of INFINITY BH CORP., a Florida corporation ("Manager"), the sole Manager of INFINITY THE OAKS, LLC, a Florida limited liability company (the "Company"), who is personally known to me or has produced ______ (type of identification) and who, after being duly sworn, deposes and says:

1. The Company is a Florida limited liability company, having its principal office at:

12000 Biscayne Blvd, Suite 407 North Miami, FL 33181

- 2. The Manager is the sole manager of the Company.
- 3. Manager is authorized to execute any instrument transferring or encumbering real property held in the name of the Company to enter into other transactions and otherwise act for and bind the Company. The signature of only the Manager shall be required.

IGHAL GOLDFARB

SWORN TO and SUBSCRIBED before me this <u>29</u> day of December, 2014.

Notary Public, State of Florida Print Name:

My Commission Expires

