## L08000117271

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TALLAHASSEE, FLORING

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## COVER LETTER

TO: Registration Section Division of Corporations Alykay Investments, LLC SUBJECT: 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: Alina M. Hernadez Name of Person Alykay Investments, LLC Firm/Company 14125 NW 80th Avenue, Suite 201 Address Miami Lakes, FL 33016 City/State and Zip Code ronnie@realfitrealty.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

STREET/COURIER ADDRESS:

Name of Person

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Reinaldo Hernandez

**MAILING ADDRESS:** 

Daytime Telephone Number

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## STATEMENT OF AUTHORITY

authority	<b>/</b> :		5.0302(1), Florida Statutes, this limited liability company		ing state	ment o	ı
FIRST:	The nan	ne o	the limited liability company is: Alykay Investmen	ts, LLC		<del></del> .	<del></del>
SECON	D: The	Flor	da Document Number of the limited liability company is:	L08000117271			
	: The str	eet a	ddress of the limited liability company's principal office V 80th Avenue, Suite 201				
	Miami	La	kes, Florida 33016				
			g address of the limited liability company's principal offi V 80th Avenue, Suite 201	ce is:			
	Miami	i La	kes, Florida 33016		TALL4	¥ 7.	analle.
FOURTH: This statement of authority grants or sets limitations of authority on all persons having position of a person in a company, whether as a member, transferce, manager, officer or otherwise person on the following:  1. May execute an instrument transferring real property held in the name of the company a. Granted to:  Reinaldo D. Hernandez, P, Richard A. Hector, T				ortoás CFC FLQ VQ	NR 25 if ic PM 4: 29		
		a.	Alina M. Hernandez, MGR, Ricardo Range		, J.S.		
		b.	No authority granted to:				
	2. Ma	ay er a. b.	ter into other transactions on behalf of, or otherwise act for Granted to:  Reinaldo D. Hernandez, P, Richt Alina M. Hernandez, MGR, Ricardo Range No authority granted to:	ard A. Hector,T	-		
Signatur	we of auth	) oriz	d representative Type	M. Hernandez,			
			Filing Fee: \$25.00 Certified Copy: \$30.00 (options	al)			