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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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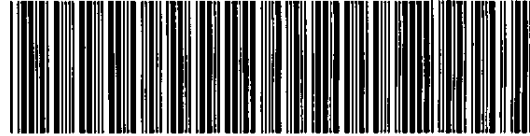
(Business Entity Name)

(Document Number)

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◊ Florida Board Certified Business Litigation

September 8<sup>th</sup>, 2015

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

Re: T&G 5<sup>th</sup> Avenue, LLC Statement of Authority

To whom it may concern:

Enclosed please find the cover letter, the executed Statement of Authority and our Trust account check number 8948 in the amount of \$ 25.00 representing the filing fee in the above referenced matter.

Should you have any questions or comments, please contact me.

Very truly yours,

Michael W. Simon

MWS:amy  
Encl.

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: T & G 5TH AVENUE, 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:

THOMAS and EUGENIA TZIKAS  
Name of Person  
T & G 5TH AVENUE LLC  
526 SE 5TH AVENUE  
Firm/Company  
↓  
Address

DELRAY BEACH, FL 33483  
City/State and Zip Code

TZIKASMD@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ms at (561) 947-0017  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

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: T&G 5th AVENUE LLC

SECOND: The Florida Document Number of the limited liability company is: LO9000108805

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

526 SE 5th Ave Delray Beach, FL 33483

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

526 SE 5th Ave. Delray Beach, FL 33483.

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:

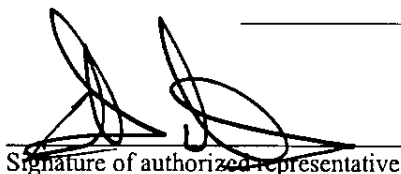
a. Granted to: Thomas L. Tzikas  
Eugenia Tzikas

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: Thomas L. Tzikas  
Eugenia Tzikas

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

  
Signature of authorized representative

Thomas L. Tzikas  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)