

**L10000054066**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

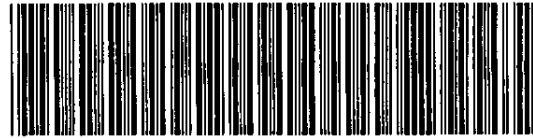
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



**500294896355**

02/02/17--01016--002 \*\*55.00

FILED  
17 FEB -2 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. SCOTT  
FEB 3 2017

LAW OFFICES  
**DOUMAR, ALLSWORTH, LAYSTROM,  
VOIGT, WACHS & ADAIR, LLP**

1177 SOUTHEAST THIRD AVENUE  
FORT LAUDERDALE, FLORIDA 33316-1109

JOHN H. ADAIR, III, P.A.  
EMERSON ALLSWORTH, P.A.  
E. SCOTT ALLSWORTH, P.A.  
MARK E. ALLSWORTH, P.A.  
KAREY L. BOSACK, P.A.

BROWARD (954) 762-3400  
TOLL FREE (866) 242-9488  
TELEFAX (954) 525-3423  
WEBSITE: SFLALAW.COM

BENJAMIN R. DISHOWITZ, P.A.  
RAYMOND A. DOUMAR, P.A.\*  
C. WILLIAM LAYSTROM, JR., P.A.  
JOHN D. VOIGT, P.A.  
JEFFREY S. WACHS, P.A. †

OF COUNSEL

JOHN W. PERLOFF, P.A.  
JODIE SEIGEL, P.A.

† ALSO ADMITTED IN PENNSYLVANIA  
\* ALSO ADMITTED IN MICHIGAN

February 1, 2017

WRITER'S DIRECT DIAL: (954) 762-3448

FEDERAL EXPRESS

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

Re: San Bernardo Investment, LLC sale to Neset Kockar

Dear Examiner:

Enclosed please find the original Statement of Authority to be filed with the Division of Corporations. I have enclosed our firm's trust account check in the amount of \$55.00 to cover the cost of filing (\$25.00) and the cost of getting a certified copy mailed back to us (\$30.00).

If you should need anything further, please do not hesitate to contact me.

Very truly yours,

*Dianne M. Bishop*  
DIANNE M. BISHOP  
REAL ESTATE PARALEGAL

DMB/dmb  
Enc.

FILED  
FEB -2 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** San Bernardo Investment, 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:

John H. Adair III, Esq.

Name of Person

Firm/Company

1177 SE 3rd Avenue

Address

Ft. Lauderdale, FL 33316

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John H. Adair III, Esq.

Name of Person

at ( 954 )

Area Code

762-3400

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

FILED  
17 FEB -2 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: San Bernardo Investment, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L10000054066

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

6135 NW 167th Street

Suite E-18

Miami Lakes, FL 33015

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

6135 NW 167th Street

Suite E-18

Miami Lakes, FL 33015

**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: Patricio Del Castillo

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: \_\_\_\_\_

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

  
Signature of authorized representative

Patricio Del Castillo

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

FILED  
17 FEB -2 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA