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## **COVER LETTER**

Registration Section

TO:

Division of Corporations	
SUBJECT: Capri Elite Holdings, LLC  Name of Limited Liability Comp	pany
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:	
Jorge E. Otero, Esq. Name of Person	
Otero & Associates, P.A. Firm/Company	
75 Valencia Ave., Fourth Floor Address	
Coral Gables, FL 33134  City/State and Zip Code	
service@oterolaw.com  E-mail address: (to be used for future annual report notification	<u>)</u>
For further information concerning this matter, please call:	•
Jorge E. Otero, Esq. at (305 Name of Person Area Code	Daytime Telephone Number
Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E138 (2/14)

## STATEMENT OF AUTHORITY

RST: The name o	f the limited liability company is: <u>Capri Elite Hol</u>	dines. IIC
		<del></del>
ECOND: The Flor	ida Document Number of the limited liability company is:	0000110117
	address of the limited liability company's principal office is:	S: <b>20</b>
138	41 SW 90th Ave. mi, FL 33176	SECHE ARO
Mia	mi, FL 33176	
	,	/A <sup>-</sup> ·
The mailir	ng address of the limited liability company's principal office is:	
138	41 SW 90th Ave.	
	mi, FL 33176	
OURTH: This states is stated as a second contract of the following	ement of authority grants or sets limitations of authority on all per n a company, whether as a member, transferce, manager, officer o	rsons having the status or or otherwise or to a specif
OURTH: This states sition of a person in the following sites of the	ement of authority grants or sets limitations of authority on all per n a company, whether as a member, transferce, manager, officer o ng:	rsons having the status or or otherwise or to a specif the company.
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