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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer	
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Office Use Only



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SECRETARY OF STATE

FILED

SEP 30 ZETS

COVER LETTER

TO: Registration Section Division of Corporations Romi Real Estate LLC SUBJECT: Dear Sir or Madam: The enclosed Statement of Authority and fee(s) are submitted for filing. **Dvora Weinreb**

Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

Name of Person Dvora M. Weinreb PA Firm/Company 20283 State Road 7 Suite 400 Address Boca Raton, FL 33498

City/State and Zip Code dvora@dwpalaw.com

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

For further information concerning this matter, please call:

Dvora Weinreb Name of Person

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 folloauthority:	owing statem	ent of
FIRST: The name of the limited liability company is:		
Romi Real Estate LLC		
SECOND: The Florida Document Number of the limited liability company is:	67	
THIRD: The street address of the limited liability company's principal office is: 3130 NW 88th Avenue		
Sunrise, FL 33351		
The mailing address of the limited liability company's principal office is: 3130 NW 88th Avenue		
Sunrise, FL 33351	-	
FOURTH: This statement of authority grants or sets limitations of authority on all persons have position of a person in a company, whether as a member, transferee, 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: Ori A. Bodenstein	se or to a spo Schreen 2015 SEP 28	
b. No authority granted to:	A 10:30	D
2. May enter into other transactions on behalf of, or otherwise act for or bind, the cora. Granted to: Ori A. Bodenstein	mpany.	
b. No authority granted to:		
N. Ru 1 tzik Yeer Ben		
Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	of signature	;