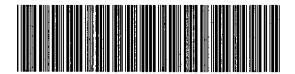
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(Req	uestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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SECRETARY OF STATE.

K SALY MAR -6 2018

COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	
	Name of Limited Liability Company
Dear Si	r or Madam:
The enc	losed Statement of Authority and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
Barry	To and Vivian Sui
	Name of Person
Great	East Properties, LLC
	Firm/Company
8928	Club Estates Way
	Address
Lake	Worth, FL 33467
	City/State and Zip Code
barryt	obt@yahoo.com and viviansui@ymail.com
	E-mail address: (to be used for future annual report notification)
	her information concerning this matter, please call: ON SUI ON TO at (954), 701-2838 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

authority	/ :	605.0302(1), Florida Statutes, this limited liability company submits the following	ng statement of
FIRST:	The name of	of the limited liability company is: Great East Properties, LLC	
SECON	D: The Flor	rida Document Number of the limited liability company is: L11000053943	
THIRD:		address of the limited liability company's principal office is: ub Estates Way	
	Lake Wo	orth, FL 33467	155 6
		ng address of the limited liability company's principal office is:	SECRETARY OF STA
	Lake Wo	orth, FL 33467	EL CORDE
position	of a person in the follow	tement of authority grants or sets limitations of authority on all persons having in a company, whether as a member, transferee, manager, officer or otherwise or ing: secute an instrument transferring real property held in the name of the company Granted to: Barry To and Vivian Sui, as Managers	or to a specific
		BOTH SIGNATURES REQUIRED	
	b.	No authority granted to: N/A	
	2. May er	nter into other transactions on behalf of, or otherwise act for or bind, the compa Granted to: Barry To and Vivian Sui, as Managers BOTH SIGNATURES REQUIRED	ny.
	b.	No authority granted to: N/A	
Signatur	arly unan		L L Signature
		Filing Fee: \$25.00	

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)