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## 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: 13 SAWFISH CT LLC	_	
	-	
SECOND: The Florida Document Number of the limited liability company is: 46-2564227	<b></b>	v.
THIRD: The street address of the limited liability company's principal office is:		
TAX & BUSINESS SOLUTIONS		
LOZO W INTOLNATIONAL SPEEDWAY SUITE 202		
DAYTONA BOACH FLORIDA FL 32114		
The mailing address of the limited liability company's principal office is:		
AS ABOVE		
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: MIKE SIZWRZ DGE		
b. No authority granted to:	<b>5</b>	E SK
<ol> <li>May enter into other transactions on behalf of, or otherwise act for or bind, the company.</li> </ol>	HAR -7	经验
a. Granted to: MITHE SAWBRINGE	3 6	Y SE S
b. No authority granted to:	(m)	ATIONS
Signature of authorized representative  Typed or printed name of Signature		
Signature of authorized representative  PRESIDENT OF  Filing Fee: \$25.00		

SANDBROOK CAPITAL IBC

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