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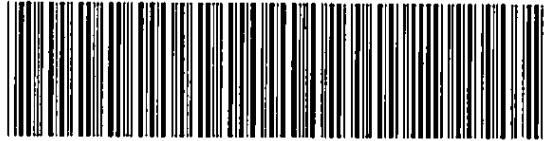
(Business Entity Name)

(Document Number)

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2024 MAY 28 AM 11:26

STATE OF ALABAMA
JULY 1, 2024

Statement
of
Authority

JUN 06 2024

D CUSHING

LAW OFFICE OF ZAEDY R. POZO
ZAEDY R. POZO, Esq.
2655 LEJUNE ROAD
SUITE 801
CORAL GABLES, FLORIDA 33134
Telephone (305) 442-7144
Facsimile (305) 448-7365
zrp@pozolaw.com

May 22, 2021

Florida Secretary of State
P.O. Box 6327
Tallahassee, Florida 32311

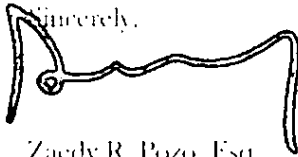
Re: Kava, LLC - Document No. 1:19000126632
Filing Statement of Authority

Gentlemen:

This office represents Kava, LLC. Attached please find Sworn Statement of Authority for filing. I have included a \$50.00 check to cover the filing fee.

Should you have any questions, feel free to contact the undersigned.

Sincerely,



Zaedy R. Pozo, Esq.
Enc.

FILED
2021 MAY 28 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FL

Prepared by:
Zaedy R. Pozo, Esq.
2655 Le Jeune Road, Suite 804
Coral Gables, Florida 33134

FILED
2024 MAY 28 AM 11:26
SPECIAL SERVICES
CLERK OF DISTRICT COURT
MIAMI, FLORIDA

**SWORN STATEMENT OF AUTHORITY FOR KAVA, LLC
PURSUANT TO FLORIDA STATUTE CHAPTER 605**

STATE OF FLORIDA

SS:

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgements, personally appeared **NILDA HAYDEE KATZ f/k/a NILDA H. ELFMAN** (the "**Affiant**"), who, being by me first sworn, deposes and says as follows:

1. That Affiant is the sole Manager of **KAVA, LLC (the "Company")**, whose principal office is located at **2655 Le Jeune Road, Suite 804, Coral Gables, Florida 33134** and has personal knowledge of the business and affairs of the Company, and as such, hereby certifies that the following is a true copy of Resolutions duly adopted by the MEMBER of the Company, at a meeting duly held on May 22, 2024 where a full quorum was present, and duly entered in the minutes of said meeting in the book of minutes of the Company, and that said Resolutions are in conformity with the applicable laws, and Operating Agreement of the Company, and that they are in full force and effect.

RESOLVED: That **KARINA DEBORA ELFMAN** and **VALERIA SABINA ELFMAN**, have been appointed as Authorized Persons to act on behalf of the Company as follows:

- a. May communicate and are authorized to receive information from the Company accountant and attorney.
- b. May communicate and are authorized to receive information from the Company's banking institution and have access to and transact business with the Company's bank account.
- c. May negotiate and lease any real estate owned by the Company with third parties.
- d. May transact the day-to-day business of the Company with third parties.

SUBJECT TO THE FOLLOWING LIMITATIONS:

That the aforesaid Authorized Persons are NOT authorized to do the following actions:

- a. shall not have the authority to bind the Company for the sale of any Company owned real estate, may not execute an instrument transferring or agreeing to transfer real property held in the name of the Company.
- b. shall not have the authority to pledge, mortgage or hypothecate any Company owned real estate, bank account, or any other Company asset.
- c. shall not have the authority to open or close a bank account in the name of the Company.

FURTHER

RESOLVED: That this Statement of Authority pursuant to Florida Statute Chapter 605, Shall be effective as of May 22, 2024, and will remain in effect until a Notice of Termination and/or Cancellation is filed.

The duly elected or appointed Manager of the Company shall remain:
NILDA HAYDEE KATZ f/k/a Nilda H. Elfman.

IN WITNESS WHEREOF, I have hereunto subscribed my signature as of the 22nd day of May 2024.

KAVA, LLC

A Florida Limited Liability Company

By:

Name: Nilda Haydee Katz

SWORN TO (or affirmed) AND SUBSCRIBED before me by means of ☒ physical presence or ☐ online notarization, this 22 day of May 2024, by **NILDA HAYDEE KATZ f/k/a NILDA H. ELFMAN**, who is well known to me or who produced the following form of identification.

My commission expires:

Notary Public

Name:

Title:

Serial No.

