

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6363

From:

Account Name : BROAD AND CASSEL - MIAMI OFFICE
Account Number : F20100000075
Phone : (305) 373-9419
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RISK ASSURANCE PARTNERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

K. SALY
AUG 17 2018

Fax Audit No. H18000239798 3

STATEMENT OF AUTHORITY

Pursuant to section 535.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: Risk Assurance Partners, LLC

SECOND: The Florida Document Number of the limited liability company is: L12000066453

THIRD: The street address of the limited liability company's principal office is:

25 Seabreeze Avenue, Suite 403

Delray Beach, FL 33483

The mailing address of the limited liability company's principal office is:

25 Seabreeze Avenue, Suite 403

Delray Beach, FL 33483

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or 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.

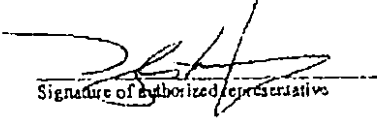
a. Granted to: Douglas K. Wright

b. No authority granted to: any other person, including any member, transferee, manager or officer of the company

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Douglas K. Wright

b. No authority granted to: any other person, including any member, transferee, manager or officer of the company


Signature of authorized representative

Douglas K. Wright

Typed or printed name of signature

Filing Fee: \$25.00

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18 AUG 16 AM 9:50
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