Note: Please print this page and use it as a cover sheet. Type the fex audit number (shown below) on the top and bottom of all pages of the document.

(((H17000087719 3)))



H170000877193ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383 -

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019

Phone

: (305)552-5973

Fax Number

: (305)675-5944

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 TRUMP PALACE 3802, LLC

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

MAR 31 2017

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

H17000087719

STATEMENT OF AUTHORITY

FIRST: The name of the limited liability company is: TRUMP PALACE 3802, LLC	
SECOND: The Florida Document Number of the limited liability company is: L12000091154	
THIRD: The street address of the limited liability company's principal office is: 18101 COLLINS AVENUE,	
SUITE 5507	
SUNNY ISLES BEACH, FL 33160	•
The mailing address of the limited liability company's principal office is: 18101 COLLINS AVENUE	
SUITE 5507	17 MAR 31
SUNNY ISLES BEACH, FL 33160	ř.
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: SCOTTS. LEVINE, ESQ.	AM 9: 29
b. No authority granted to:	· .
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company, a. Granted to: SCOTT S. LEVINE, ESQ.	
b No authority granted to:	
IGOR ZORIN	•
Signature of anthonized pepresentative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

CR2E138 (2/14)