

10/28/2016 14:32

(FAX)

P.002/004

10/28/2016

Division of Corporations

**L12000103391**  
Florida Department of State  
Division of Corporations  
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From:

Account Name : GULATI LAW  
Account Number : I20130000014  
Phone : (407)900-5054  
Fax Number : (407)517-4931

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NMA HOSPITALITY, LLC

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NMA HOSPITALITY LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sarah Gulati, Esq

Name of Person

Premier Florida Title, LLC

Firm/Company

479 Montgomery Place

Address

Altamonte Springs, FL 32714

City/State and Zip Code

Info@premierfloridatitle.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sarah Gulati

at ( 407 )

900-5054

Name of Person

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

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: NMA HOSPITALITY, LLC

SECOND: The Florida Document Number of the limited liability company is: L12000103391

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

926 North Bay Street

Eustis, FL 32726

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

926 North Bay Street

Eustis, FL 32726

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: Gordhanbhai Patel or Amit Patel

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: Gordhanbhai Patel or Amit Patel

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

Gordhanbhai Patel

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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