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## COVER LETTER

	ration Section on of Corporations			
SHRIECT:	WILLOW PROPERTIES US	SA LLC		
	Name of Li	mited Liability Comp	any	
Dear Sir or Ma	dam:			
The enclosed S	tatement of Authority and fee(s) are	submitted for filing.		
Please return al	teorrespondence concerning this ma	tter to the following:		
LUK	E G. SHERLOCK III, ESQ.			
<u> </u>	Name of Person			
BER	T RICHARD OLIVER, PA			
	Firm/Company			
199	98 HERMOSO ROAD			
	Address			
BO	CA RATON, FL 33486			
	City/State and Zip Code	<del></del>		
E-mai	l address: (to be used for future annu	al report notification)	)	
For further info	rmation concerning this matter, pleas	se call:		
LUKE	G. SHERLOCK III, ESQ.	561	414-4604	
	Name of Person	Area Code	Daytime Telephone Number	
<b>.</b>				
Mailing Address:		_	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## 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: \_\_\_\_\_WILLOW PROPERTIES USA LLC L12000119061 SECOND: The Florida Document Number of the limited liability company is: **THIRD:** The street address of the limited liability company's principal office is: 125 NE 32nd Street Unit 1604 Miami, FL 33137 The mailing address of the limited liability company's principal office is: Same as Street Address 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. Serge van Duuren a. Granted to:\_ Klaas van Duuren b. No authority granted to: \_\_\_\_ May enter into other transactions on behalf of, or otherwise act for or bind, the company, a. Granted to: Serge van Duuren Klaas van Duuren b. No authority granted to:

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

Serge van Duuren, Managing Member

Typed or printed name of signature

gnature of authorized representative