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To:

Division of Corporations
Fax Number : (950)617-6383

From:

Account Name : NICK LAW FIRM, P.L.
Account Number : 120110000006
Phone : (239)449-6150
Fax Number : (977)644-0560

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SIRENA MANAGEMENT, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

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: Sirena Management, LLC

SECOND: The Florida Document Number of the limited liability company is: L12000119849

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

2601 S. Tamiami Trail

Sarasota, FL 34239

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

2601 S. Tamiami Trail

Sarasota, FL 34239

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.

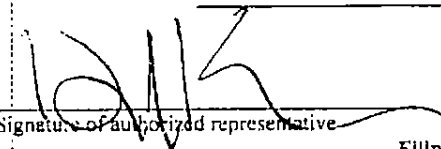
a. Granted to: David W. Shoemaker

b. No authority granted to: Yara Shoemaker

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

a. Granted to: David W. Shoemaker

b. No authority granted to: Yara Shoemaker


Signature of authorized representative

David W. Shoemaker

Typed or printed name of signature

Filing Fee: \$25.00

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