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COVER LETTER

Registration Section Division of Corporations

Tallahassee, Florida 32301

TO:

SUBJECT: TESSA 2B LLC				
	Limited Liability Co	ompai	ny	
Dear Sir or Madam:				
The enclosed Statement of Authority and fee(s) ar	e submitted for filir	ng.		
Please return all correspondence concerning this n	natter to the followi	ing:		
Sarah Barbaccia				
Name of Person				
Sarah Barbaccia, P.A.				
Firm/Company				
942 SW 93 Terrace				
Address	. <u>.</u> .	_		
Plantation, FL 33324				
City/State and Zip Code		_		
sbarbaccia@barbaccialaw.com				
E-mail address: (to be used for future and	nual report notificat	tion)		
For further information concerning this matter, ple	ease call:			
Sarah Barbaccia	at (_954	١	748-4890	
Name of Person	Area Cod	c /_	Daytime Telephone Number	
STREET/COURIER ADDRESS:			ADDRESS:	
Registration Section Division of Corporations	Registration Section			
Clifton Building	Division of Corporations P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			

ExhibitA

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County: Palu Beach	
County1	

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: TESSA 2B LLC

SECOND: The Florida Document Number of the limited liability company is: <u>L12000148464</u>

THIRD: The street address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE

FT. LAUDERDALE, FL 33311

The mailing address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE

FT. LAUDERDALE, FL 33311

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: Sarah Barbaccia, Esq.
 - 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: Sarah Barbaccia, Esq.

t	o. No authority granted to	o: Juster flac	- Cagana	<u>-1</u> 6	In.
Jean Mario Casa	nova				
TI A Jail	ne foregoing instrument w , 2018, by Jean Mar		roduced	<u>○</u> day of	
SEAL:		٦	Notary Public		
Notaire	Mª Jean-François DUPLEIX NOTAIRE 2. Rue du Dr Joseph Ricou 97160 LE MOULE GUADELOUPE		DUPLE IX Printed Notary Nam	for Fa	منهم
		l		TALLAH	, 1018 H

Filing Fee:

\$25.00 Certified Copy: \$30.00 (optional) Antoine Gendre

The foregoing instrument was sworn and subscribed before me this day of MARCH , 2018, by ANTONE COSDIE, who produced MICHAN DAYS LICENSE as identification.

SEAL:: LAWRENCE JOSEPH ZANE
Notary Public, State of Michigan
County of Wayne
My Commission Expires Aug. 04, 2024
Acting in the County of CANALIANA

Notary Public

LAWZGIOE ZANE
Printed Notary Name

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

FILED ALLAHASSEC FINISH