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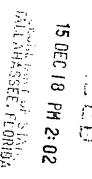
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate:	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the followin authority:			
FIRST: The name of the limited liability company is: Zv. da Investment	SLLC	<u>-</u>	
SECOND: The Florida Document Number of the limited liability company is: 4130000	5146		
THIRD: The street address of the limited liability company's principal office is:			
Hollywood Fr. 33024			
The mailing address of the limited liability company's principal office is:			
pantaton Fz. 33325			
FOURTH: This statement of authority grants or sets limitations of authority on all persons having the position of a person in a company, whether as a member, transferee, manager, officer or otherwise or person on the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: Chata Vanuau	to a specific	15 OEC 18 PM	
b. No authority granted to:	E FLORIBA	1 2: 02	!
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company			
b. No authority granted to:			
I thuman 20	cla		
Signature of authorized representative Filing Fee: \$25.00 Certified Conv. \$30.00 (ordinar)			

CR2E138 (2/14)