

04/28/2017

11:08

FAX

F001/003

L13000058412

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

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

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

Email Address:

Office@gulati-law.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SOHAM INVESTMENTS ONE LLC

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Corporate Filing Menu

Help

K. SALY

MAY - 1 2017

04/28/2017 11:03

(FAX)

P.002/003

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Soham Investments One 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

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  
Tallahassee, Florida

MAILING ADDRESS:

Registration Section

108

1314

CR2E138 (2/14)

She said we  
could wait till  
we get back on  
this one!  
No Rush.

## 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: Soham Investments One LLC

**SECOND:** The Florida Document Number of the limited liability company is: L13000058412

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

409 SE 1st Avenue

Florida City, FL 33034

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

409 SE 1st Avenue

Florida City, FL 33034

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TALLAHASSEE, FLORIDA

**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: Yoghendra Amin

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: Yoghendra Amin

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

  
Signature of authorized representative

Yoghendra Amin

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**