From: Baldy Martinez 2/11/2016

HIGOUTO 35986 3
Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name

: BALDY MARTINEZ P.A.

Account Number : 120110000042

: (305)454~5804

Fax Number

: (305)454-5808

\*\*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 **CERGEI LLC**

Certificate of Status	0
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To: +18506176383

'r Fax: +18506176383

# H16000035986 3

#### COVER LETTER

	gistration Section vision of Corporations									
SUBJECT:	CERGEI LLC									
SOBJECT.		imited Liability Comp	any							
Dear Sir or Madam:										
The enclose	d Statement of Authority and fee(s) ar	e submitted for filing.								
Please retur	n all correspondence concerning this u	natter to the following:								
BALDY N	MARTINEZ, ESQ.									
	Name of Person									
BALDY N	MARTINEZ, P.A.									
	Firm/Company									
1999 SW	/ 27TH AVENUE, 1ST FLOO	R								
···	Address	-								
MIAMI, F	L 33145									
	City/State and Zip Code									
E-	mail address: (to be used for future and	nual report notification)	<u> </u>							
For further i	information concerning this matter, ple	ease call:								
305		454 at ( )	5804							
	Name of Person	Area Code	Daytime Telephone Number							
	REET/COURIER ADDRESS:		G ADDRESS:							
	gistration Section	Registration of								
	vision of Corporations ifton Building	P.O. Box	of Corporations 6327							
26	61 Executive Center Circle Hahassee, Florida 32301		e, Florida 32314							

CR2E138 (2/14)

Fax: (305) 615-1371

### To: +18508178383 HILUUUU 55484 5

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#### STATEMENT OF AUTHORITY

rategi; in	e name of the limited liability company is:		_
			_
SECOND:	The Florida Document Number of the limited liability company is: L13000082291		
THIRD: TI	ne street address of the limited liability company's principal office is:  O1 NW 10th Street		
Ho	mestead, FL 33033		
	he mailing address of the limited liability company's principal office is: O1 NW 10th Street		
Ho	mestead, FL 33033		
1.	May execute an instrument transferring real property held in the name of the company.  a. Granted to: Yelipza Lozano	RETARY AHASSE	- ;
	b. No authority granted to:	AM &: 41 OF STATE E. FLORID	£
2.	May enter into other transactions on behalf of, or otherwise act for or bind, the compa	ny.	
	b. No authority granted to:		