

**L13000142709**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

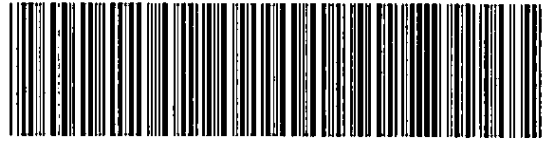
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**C. GOLDEN**

**MAY - 2 2019**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Shai Properties, 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:

Malka Y. Shai

\_\_\_\_\_  
Name of Person

Shai Properties LLC

\_\_\_\_\_  
Firm/Company

2875 NE 191st Street, Suite 601

\_\_\_\_\_  
Address

Aventura, FL 33180

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pam Van Woerkom

at ( 561 ) 721-9686

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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: Shai Properties, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000142709

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

2875 NE 191st Street, Suite 601

Aventura, FL 33180

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

2875 NE 191st Street, Suite 601

Aventura, FL 33180

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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: Shai Y. Malka

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: Shai Y. Malka

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

Signature of authorized representative

Shai Y. Malka

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)