

U13000 160479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

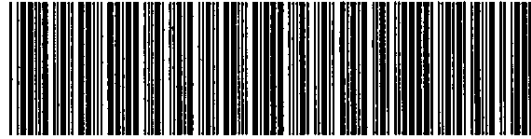
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200312043142

04/23/18--01050--007 **55.00

2018 APR 23 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEKIMA INVESTORS 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:

Julie Gonzalez Cohen

Name of Person

Strock & Cohen, Zipper Law Group, P.A.

Firm/Company

2900 Glades Circle Suite 750

Address

Weston, FL 33327

City/State and Zip Code

jcohen@strocklaw.com

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

For further information concerning this matter, please call:

Julie Gonzalez Cohen

Name of Person

at (954)

Area Code

6592220

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: SEKIMA INVESTORS LLC

SECOND: The Florida Document Number of the limited liability company is: L13000160479

THIRD: The street address of the limited liability company's principal office is:
3848 Cortland Drive
Davenport, FL 33837

The mailing address of the limited liability company's principal office is:
3848 Cortland Drive
Davenport, FL 33837

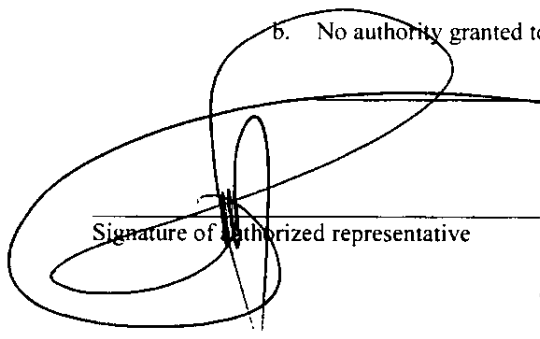
FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.
a. Granted to: Hagob Karadjian or Anais Karadjian
or Hosep Kerejian

b. No authority granted to: N/A

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
a. Granted to: Hagob Karadjian or Anais Karadjian
or Hosep Kerejian

b. No authority granted to: N/A



Signature of authorized representative

Hosep Kerejian

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

2018 APR 23 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED