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SECRETARY OF STATE

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COVER LETTER

Division of Corporations 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: INVESTMENITS NW 20th OUCEOQUE, FC
City/State and Zip Code undinvstegmail.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 393-8070
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

TO:

Registration Section

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: <u>O&O INVESTMENTS LL</u>
SECOND: The Florida Document Number of the limited liability company is: 130017504
THIRD: The street address of the limited liability company's principal office is:
BY F MM 3UN BUE
FORT LAWERDALE, FL 3331)
The mailing address of the limited liability company's principal office is: 1826 NW 204 BUR FORT LOWDER OALP, FL 33311
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: DAM MONDECUS &
JOHN G. MORNA
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: DAN MONDEWS &
b. No authority granted to:
Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)