L140000 59909

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MARIA C. ARRIOLA VÉLEZ, P.A.

MARIA C. ARRIOLA VÉLEZ ATTORNEY AT LAW 35 ALMERIA AVENUE CORAL GABLES, FL 33134

TELEPHONE: (305) 461-9223
TELECOPIER: (305) 461-9498
E-MAIL: MVELEZ®VELEZLAWOFFICES.COM

June 29, 2016

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

RE:

Courvoisier 2210 LLC

Document #: L14000059909

Dear Sir/Madam:

Enclosed is an original, executed Statement of Authority, together with our check in the amount of \$55.00 representing your fee for filing and for providing us with a certified copy of the Statement of Authority. We are also enclosing a self-addressed stamped envelope for your convenience.

If you have any questions, please contact the undersigned.

Thank you.

Very truly yours,

Mayra C. Guixens Assistant to Maria C. Arriola Velez

/mcg encls.

COVER LETTER

TO: Registration Section Division of Corporations			
Courvoisier 2210 LLC			
	Limited Liability Com	pany	
Dear Sir or Madam:		•	
The enclosed Statement of Authority and fee(s) are	e submitted for filing.		
Please return all correspondence concerning this n	natter to the following	:	
Maria C. Arriola Velez			
Name of Person			
Maria C. Arriola Velez PA			
Firm/Company			
35 Almeria Avenue			
Address			
Coral Gables, FL 33134			
City/State and Zip Code			
eugeniotorres@hotmail.com	•		
E-mail address: (to be used for future ann	nual report notification	· i)	
For further information concerning this matter, ple	ease call:		
Maria C. Arriola Velez	305	461-9223	
Name of Person	Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations	Registrati	MAILING ADDRESS: Registration Section Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

authority		statement of
FIRST:	The name of the limited liability company is: Courvoisier 2210 LLC	
SECONI	D: The Florida Document Number of the limited liability company is: L14000059909	
	The street address of the limited liability company's principal office is: 8325 SW 49 Avenue	
	Miami, FL 33143	
		16 JU
•	The mailing address of the limited liability company's principal office is:	5-5
-	Miami, FL 33143	PH 1: 55
position of person on	I: This statement of authority grants or sets limitations of authority on all persons having the fa person in a company, whether as a member, transferee, manager, officer or otherwise or the following: May execute an instrument transferring real property held in the name of the company. a. Granted to: Eugenio A. Torres, Yolanda Ostos de Torres or Paola Torres, each individually	
	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: Eugenio A. Torres, Yolanda Ostos de Torres or Paola Torres, each individually	' .
	b. No authority granted to: n/a	<u></u>
Signature	of authorized representative Eugenia A. Torres Typed or printed author of significant sig	enature
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	,