L14000 062979

	•				
(Requ	estor's Name)				
(Addre	ess)	<u> </u>			
(Addre	ess)				
(City/S	State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Busin	ess Entity Nar	me)			
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



400289982724

09/12/16--01029--029 **25.00

16 SEP 17 F STATE

day

COVER LETTER

TO: Registratical Section Division of Corporations		•
UPTOWN MIAMI 8281 LLC SUBJECT:		
Name of Limited	l Liability Com	ipany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are subm	itted for filing.	
Please return all correspondence concerning this matter to	o the following	Ç.
NICK HAMANN		
Name of Person		•
UPTOWN MIAMI 8281 LLC		
Firm/Company		
490 NW S RIVER DR		
Address		
MIAMI, FL 33128		
City/State and Zip Code		
NHAMANN@URBANATLANTICGROUP.C	ОМ	
E-mail address: (to be used for future annual re	port notification	n)
For further information concerning this matter, please cal	11:	
MICHAEL ALBERT	786	252 2200
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 sect authority:	ion j 05.0302(1), Florida Stati			ving statement of
FIRST: The na	me of the limited liability con	mpany is:	MIAMI 8281 LLC	
SECOND: The	Florida Document Number of	of the limited liability cor	L1400006297	9
	treet address of the limited lia	ability company's principa	al office is:	
MIAN	/II, FL 33128			-
	nailing address of the limited		•	_
MIAN	/II, FL 33128			-
person on the fo	ay execute an instrument trans NICOLA a. Granted to:	sferring real property held	d in the name of the compar	<u>.</u>
	b. No authority granted to	ALL OTHERS		E, FLORIDA
2. M	ay enter into other transaction NICOL a. Granted to:	AS HAMANN	rise act for or bind, the comp	pany.
	b. No authority granted to	ALL OTHERS		-
	12-		Man Hormon	
Signature of aut		Filing Fee: \$25.00 Certified Copy: \$30.00	Typed or printed name of (optional)	fsignature

CR2E138 (2/14)