#/14000069761

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
. (Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of	of Status	
Special Instructions to	Filing Officer:		





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MUROFF, MILESTONE AND MILESTONE

ATTORNEYS AT LAW

NEIL A. MILESTONE neil@mmmtitle.com

JAN MILESTONE jan@mmmtitle.com MELVIN I. MUROFF

August 26, 2014

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

RE: C.EM.A. Investment Properties, LLC. – Document No. L14000069761
Milex Properties, LLC. – Document No. L14000069759
ASME Properties, LLC. – Document No. L14000069760

Dear Sir/Madam:

Enclosed please find Cover Letters and Statements of Authority for each of the above-referenced Limited Liability Companies.

Also enclosed is our check in the amount of \$165.00 representing the filing fee for each of the Statements of Authority and for a Certified Copy of the Statement of Authority for each company.

Please return the verification of filing and certified copies to us in the enclosed envelope.

Please feel free to contact the undersigned if you have any questions requiring any other additional information.

Very truly yours,

NEIL A. MILESTONE

allhumu

NAM: sb

Z:\Client Wills & Trusts & Estates 2014\Sosa, Carmen\Division of Corporations Letter Statement of Authority 07-31-14.doc

AVENTURA, VIEW, SUITE 709 2999 NORTHEAST 191st STREET AVENTURA, FLORIDA 33180 TELEPHONE (305) 682-2324 BROWARD (954) 454-4522 FAX (305) 682-2327

Via: FedEx

COVER LETTER

TO:	TO: Registration Section Division of Corporations			
SUBJE	C.E.M.A. Investment Proper	ties, LLC		
00000		mited Liability Comp	pany	
Dear Si	r or Madam:			
The end	closed Statement of Authority and fee(s) are	submitted for filing.		
Please r	return all correspondence concerning this ma	atter to the following:		
CAR	MEN R. SOSA			
	Name of Person			
	Firm/Company			
540 V	VEST 77th STREET			
	Address			
HIALI	EAH, FL 33014			
	City/State and Zip Code			
lizsos	sa@aol.com			
	E-mail address: (to be used for future annu	ual report notification	n)	
For furt	ther information concerning this matter, plea	ase call:		
ELIZA	ABETH SOSA PEREZ	305	342-0022	
	Name of Person	Area Code	Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registrati Division	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
	2661 Executive Center Circle Tallahassee, Florida 32301		ce, Florida 32314	

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability authority:	_		
FIRST: The name of the limited liability company is: C.E.M.A. I	nvestment Properties, LLC		
SECOND: The Florida Document Number of the limited liability company is: L14000069761			
THIRD: The street address of the limited liability company's princip 540 WEST 77th STREET	pal office is:		
HIALEAH, FL 33014			
The mailing address of the limited liability company's prints 540 WEST 77th STREET	, we will be a second of the s		
HIALEAH, FL 33014			
position of a person in a company, whether as a member, transferee, person on the following: 1. May execute an instrument transferring real property he a. Granted to: ELIZABETH SOSA PERE	eld in the name of the company.		
b. No authority granted to:			
May enter into other transactions on behalf of, or other a. Granted to: ELIZABETH SOSA PER	, <u> </u>		
b. No authority granted to:			
Signature of authorized representative	CARMEN R. SOSA - Member Typed or printed name of signature		
Filing Fee: \$25.00 Certified Copy: \$30.00			