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S. WARREN DEC 2 2 2017

## COVER LETTER

TO: Registration Section Division of Corporations		
Sunset Oak Grove Estates	s, LLC	
SUBJECT: Name o	f Limited Liability	Company
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s)	are submitted for ti	ling.
Please return all correspondence concerning this	matter to the follo	wing:
Damaris Pereira		
Name of Person		<del></del>
Pereira Law, P.A.		
Firm/Company	<del></del>	<del></del>
6500 Cow Pen Road, Suite 204		
Address		<del></del>
Miami Lakes, FL 33014		
City/State and Zip Code		<del></del>
no change		
E-mail address: (to be used for future ;	annual report notific	cation)
For further information concerning this matter,	pleuse call:	
Damaris Pereira	305	821-5122
Name of Person	Area C	ode Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Reg Div	ILING ADDRESS: istration Section ision of Corporations . Box 6327

Tallahassee, Florida 32314

2661 Executive Center Circle

Tallahassee, Florida 32301

## STATEMENT OF AUTHORITY

authority		J	nt of	
FIRST:	The name of the limited liability company is: Sunset Oak Grove Estates, LLC		<del></del>	
SECON	D: The Florida Document Number of the limited liability company is:	6		
THIRD	: The street address of the limited liability company's principal office is: 9150 S. Dadeland Blvd., Suite 1508			
	Miami, FL 33156	-		
	The mailing address of the limited liability company's principal office is: 9150 S. Dadeland Blvd., Suite 1508	_		
	Miami, FL 33156	-		
position	<ul> <li>This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise on the following:</li> <li>May execute an instrument transferring real property held in the name of the comparate.</li> <li>a. Granted to: Jose Pereira, Jr.</li> </ul>	or to a spec	rific	
	h. No authority granted to:		DEC 22 PH 2: 87	
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the com a. Granted to: Jose Pereira, Jr.	pany.		
	b. No authority granted to:	-		
/	Jose Pereira, Jr.	_	_	
`Signatui	re of authorized representative  Filing Fee: \$25.00  Certified Copy: \$30.00 (optional)	of signature		