## 2/4000/55069

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·		
(Ad	dress)			
(Ac	dress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bı	isiness Entity Nai	me)		
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
		:		

Office Use Only



000278956220

11/09/15--01044--023 \*\*25.00

SEGREDARY OF STATE

K.SALY EXAMNER 2015

## **COVER LETTER**

	istration Section ision of Corporations		
oun rece	Perla Negra Real Estate II L	LC	
SUBJECT:	Name of Li	mited Liability Compar	ny
Dear Sir or N	∕ladam:		
The enclosed	Statement of Authority and fee(s) are	submitted for filing.	
Please return	all correspondence concerning this ma	atter to the following:	
Mercedes	s R. Rico		
	Name of Person		
Perla Neg	gra Real Estate II LLC		
	Firm/Company		
12535 SV	V 76 Street		
	Address		
Miami, Fl	orida 331 <b>7</b> 3		
	City/State and Zip Code		
E-r	nail address: (to be used for future annu	ual report notification)	
For further in	nformation concerning this matter, plea	ase call:	
Mercede	s R. Rico	at (	
	Name of Person	at () _ Area Code	Daytime Telephone Number
Reg	REET/COURIER ADDRESS: gistration Section	MAILING ADDRESS: Registration Section	

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

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## STATEMENT OF AUTHORITY

authority:		limited liability company submits the fo	J		
FIRST: The name	RST: The name of the limited liability company is: Perla Negra Real Estate II LLC				
SECOND: The Flo	orida Document Number of the lim	nited liability company is: L14000155	i069		
	t address of the limited liability con	mpany's principal office is:	_		
Miami F	T 331 <b>3</b> 3		2015 NOV -9 F		
The mail	ing address of the limited liability	company's principal office is:	HASSEE FLOR		
position of a person person on the follow	in a company, whether as a memb ving: xecute an instrument transferring r	limitations of authority on all persons haber, transferee, manager, officer or otherweal property held in the name of the complete.	wise or to a specific		
b.	No authority granted to:	See the see	<del></del>		
2. May e	. Mercedes R.	nalf of, or otherwise act for or bind, the c	ompany.		
b.	No authority granted to:				
much to		Mercedes R. Ric			
Signature of authoris	Filing Fe	Typed or printed name: \$25.00    Capy: \$30.00 (optional)	ne of signature		

CR2E138 (2/14)