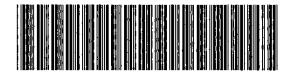
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HAR 1 4 2017 J. HARRIS

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT:	MADISON TRUST, LLC		
		ited Liability Comp	any
Dear Sir or l	Madam:		
The enclose	d Statement of Authority and fee(s) are si	abmitted for filing.	
Please return	n all correspondence concerning this matt	er to the following:	
Joel Piot	rkowski		
	Name of Person		
Green &	Piotrkowski, PLLC		
	Firm/Company		
317 - 718	st Street		
	Address		
Miami Be	each, FL 33141		
	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
joel@gkp	opa.com		
E-1	mail address: (to be used for future annua	l report notification)
For further i	information concerning this matter, please	e call:	
Joel Piot	rkowski	305	865-4314
	Name of Person	Area Code	Daytime Telephone Number
Re Div Cli	REET/COURIER ADDRESS: gistration Section vision of Corporations fron Building 61 Executive Center Circle	Registrati Division (P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314
	llahassee, Florida 32301	i alialiass	,

CR2E138 (2/14)

STATEMENT OF AUTHORITY

authority:	tatement of
FIRST: The name of the limited liability company is: Madison Trust, LLC	
SECOND: The Florida Document Number of the limited liability company is: L14000166123	
THIRD: The street address of the limited liability company's principal office is: 210 - 71st Street	
Suite 309	
Miami Beach, FL 33141	72
The mailing address of the limited liability company's principal office is: 210 - 71st Street	7 MAR 13 PH 1: 01
Suite 309	PH I
Miami Beach, FL 33141	# O1
May execute an instrument transferring real property held in the name of the company. a. Granted to: SEE ATTACHED	
b. No authority granted to:	
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company. a. Granted to:	
b. No authority granted to:	
Signature of authorized representative Typed or printed name of sign	

This Instrument Prepared by: Juan C. Valdes, Esq. Quesada Valdes, PLLC 1313 Ponce de Leon Blvd. Suite 200 Coral Gables, FL 33131

STATEMENT OF AUTHORITY

- I, Haim Yehezkel, as Manager of Madison Trust, LLC, a Florida limited liability company, (the "Company"), and pursuant to Florida Statutes § 605.0302(1) does hereby submit the following Statement of Authority:
- 1. The name, street and mailing address and Florida Document Number of the limited liability company as appears on the records of the Florida Department of State, Division of Corporations is as follows:

Name: Madison Trust, LLC, a Florida limited liability company Principal Address: 210 – 71st Street, Suite 309, Miami Beach, FL 33141

Mailing Address: 210 – 71st Street, Suite 309, Miami Beach, FL 33141

Document Number: L14000166123

- 2. This Statement of Authority grants or sets limitations of authority on all persons or entities having the statute or position of a person in a company, whether as a member, transferee, manager, officer or otherwise, or to a specific person on the following:
 - A. Haim Yehezkel, as Manager of the Company, is hereby authorized to execute an instrument, deed, conveyance or other document transferring property held in the name of the Company; and
 - B. Haim Yehezkel, as Manager of the Company, is hereby authorized to enter into other transactions on behalf of, or otherwise act for or bind, the Company, including but not limited to the entering into any contract, lease, and any document necessary to obtain a loan in the name of the Company;
- 3. That the foregoing Statement of Authority is outstanding and has not been modified or rescinded.

IN WITNESS WHEREOF, I have hereunto set my hand and seal as Manager of Madison Trust, LLC, a Florida limited liability company, hereto this Ab Lay of February, 2017.

Madison Trust, LLC, a Florida limited liability

company

By:

Haim Yehezkel, Manager

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