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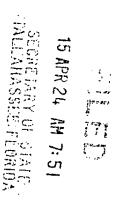
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## **COVER LETTER**

Registration Section
Division of Corporations TO:

SUBJECT:	SUNSHINE INVES	TMENTS OF	FLORIDA L	.LC	
		Name of Limited	Liability Comp	pany	
Dear Sir or N	Madam:		,		
The enclosed	Statement of Authority a	nd fee(s) are subm	itted for filing.	·	
Please return	all correspondence conce	rning this matter t	o the following	:	
Charles Z	. Kalchman		•		•
	Name of Person	on .			
Charles Z	Z. Kalchman, Esq.				
<del></del>	Firm/Compan	у	<del></del>		
17071 W.	. Dixie Highway				
	Address		<del></del> -		
North Mia	ami Beach, FL 3316	0			
	. City/State and Zip C	ode			
jeanweck	sler@gmail.com			·	
E-r	nail address: (to be used for	or future annual re	port notification	n)	
For further in	nformation concerning this	s matter, please ca	11:		
Charles Z	Z. Kalchman, Esq.	a	305	937-5134	· .
	Name of Person		Area Code	Daytime Te	elephone 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 s authority:	section 605.0302(1), Florida Statutes, this limited liability company submits the following	ng statemer	ıt of
FIRST: The	e name of the limited liability company is: Sunshine Investments of Florida	_LC	
· ·			<del></del>
SECOND:	The Florida Document Number of the limited liability company is: L15000008488		· · · · · · · · · · · · · · · · · · ·
THIRD: Th	the street address of the limited liability company's principal office is:  O Leslie Drive #515		
Ha	llandale Beach, FL 33009		,
	the mailing address of the limited liability company's principal office is:  O Leslie Drive #515		
Ha	llandale Beach, FL 33009		
position of a person on the		the status of th	15 Jan 24 14 7: 5
2.	May enter into other transactions on behalf of, or otherwise act for or bind, the compa  a. Granted to:  Andres Wecksler or Marina Wecksler	ny.	
	b. No authority granted to:  Vean Mean to  Tean to		es le
Signature/of	authorized representative  Filing Fee: \$25.00  Certified Copy: \$30.00 (optional)	signature	