1500088666

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

K. SALY FEB 28 2018

COVER LETTER

Registration Section Division of Corporations TO:

SUBJECT:	2399 COLLINS UNIT 1031 HOLDINGS, LLC		
SUBJECT:		Limited Liability Comp	pany
Dear Sir or I	Madam:		
The enclose	d Statement of Authority and fee(s) a	are submitted for filing.	
Please return	n all correspondence concerning this	matter to the following	:
Jenna Ch	nase Fabian		
	Name of Person		
Chase La	aw, P.A.		
	Firm/Company		
1354 Wa	shington Ave. Suite 220		
	Address		
Miami Be	each, FL 33139		
	City/State and Zip Code		
jenna@c	haselawflorida.com		
E-	mail address: (to be used for future a	nnual report notification	1)
For further i	information concerning this matter, p	lease call:	
Jenna Cł	nase Fabian	305 at (397-8595
	Name of Person	Area Code	Daytime Telephone Number

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

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

CR2E138 (2/14)

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT OF AUTHORITY

outhority:	ability company is: 2399 COLLINS UNIT 1031 HOLDINGS, LLC
IRST: The name of the limited lia	ibility company is:
ECOND: The Florida Document	Number of the limited liability company is: L15000088666
	imited liability company's principal office is:
MIAMI BEACH, FL	33141
The mailing address of the	ne limited liability company's principal office is:
6515 COLLINS AVE. I	JNIT 1709
MIAMI BEACH, FL 33	3141
May execute an instru a. Granted to:	ment transferring real property held in the name of the company. MIR R RADJABI-RAHAT
b. No authority	granted to:
•	transactions on behalf of, or otherwise act for or bind, the company. AMIR R RADJABI-RAHAT
b. No authority	granted to:
J. Rodal.n	IRADJ RADJABI-RAHAT AND MEHRI A
Signature of authorized representati	

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)