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COVER LETTER

	Registration Section Division of Corporations			
CUDING	JP III MANAGEMENT LLC			
SUBJEC		mited Liability Comp	any	
Dear Sir	or Madam:			
The enclo	osed Statement of Authority and fee(s) are	submitted for filing.		
Please re	turn all correspondence concerning this ma	atter to the following:		
Valerie	Barnhart, Esq.			
	Name of Person			
Perera	Barnhart			
	Firm/Company			
12555	Orange Drive, Second Floor			
	Address			
Davie,	FL 33330			
	City/State and Zip Code			
Jorge.	Perera@columbuscl.com			
	E-mail address: (to be used for future annual	ual report notification)	
For furth	er information concerning this matter, plea	ise call:		
Valerie	e Barnhart, Esq.	786 at ()		
	Name of Person	Area Code	Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section	

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)

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the followauthority: IP III MANAGEMENT LLC	
FIRST: The name of the limited liability company is: JP III MANAGEMENT LLC	
SECOND: The Florida Document Number of the limited liability company is: L1500011461	9
THIRD: The street address of the limited liability company's principal office is: 17134 NW 87th Place	
Hialeah, FL 33018	-
The mailing address of the limited liability company's principal office is: 17134 NW 87th Place	_
Hialeah, FL 33018	
FOURTH: This statement of authority grants or sets limitations of authority on all persons having position of a person in a company, whether as a member, transferee, manager, officer or otherwise person on the following: 1. May execute an instrument transferring real property held in the name of the compana. a. Granted to:	ny.
b. No authority granted to:	-2 AH 7: NACE SECUELOR
May enter into other transactions on behalf of, or otherwise not for or bind, the company. a. Granted to: Ariel Arrate only to open/close utility accounts,	-
pull permits, & communicate with/obtain information from b. No authority granted to:	acity/county governmen and employees regarding work being performed of the company.
Jorge Perera	
Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	of signature