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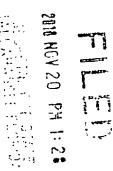
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O EST TO THE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: FIMARA LLC Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Statement of Authority and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Sarah Barbaccia	
Name of Person	
Sarah Barbaccia, P.A.	
Firm/Company	
942 SW 93 Terrace	
Address	
Plantation, Fl. 33324	
City/State and Zip Code	28
sbarbaccia@barbaccialaw.com	2018 NOV 25
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	-7

at (_954

Area Code

STREET/COURIER ADDRESS:

Name of Person

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

Sarah Barbaccia

MAILING ADDRESS:

Daytime Telephone Number

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

STATEMENT OF AUTHORITY

		T: The name of the limited liability company is: FIMARA LLC
	3866	OND: The Florida Document Number of the limited liability company is:_L150001
		RD: The street address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE
		FT. LAUDERDALE, FL 33311
-	2018 NGV 20	The mailing address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE
17.	PH 1: 2	FT. LAUDERDALE, FL 33311
	ns having the	RTH: This statement of authority grants or sets limitations of authority on all persons or position of a person in a company, whether as a member, transferee, manager, of a specific person on the following:
	company.	1. May execute an instrument transferring real property held in the name of the
		a. Granted to: Sarah Barbaccia, Esq.
		b. No authority granted to:
	as having the ficer or otherwise company.	s or position of a person in a company, whether as a member, transferee, manager, of a specific person on the following: 1. May execute an instrument transferring real property held in the name of the a. Granted to: Sarah Barbaccia, Esq.

a. Granted to: Sarah Barbaccia, Esq.

STATEMENT OF AUTHORITY

	The name of the limited liability company is: FIMARA LLC	
SECON	D: The Florida Document Number of the limited liability company is: _L15000123866_	
THIRD	: The street address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE	
	FT. LAUDERDALE, FL 33311	2811
		2818 NOV 20 PH 1
	The mailing address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE	PH 1:2
	FT. LAUDERDALE, FL 33311	1 · · · · · · · • •
status or	H: 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 pecific person on the following:	ng the otherwise
	1. May execute an instrument transferring real property held in the name of the compar	ıy.
	a. Granted to: Sarah Barbaccia, Esq.	

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a Granted to : Sarah Rathaccia Esq.

b. No authority granted to:	
V 7A	
VINCENT FRERING COUNTRY OF FRANCE	Lo Tv
The foregoing instrument was NOVENBEL 2018, by VINCE PASS PORT SEAL:	sworn and subscribed before me this \(\lambda \frac{7 \tau \tau \text{NL}}{\text{NL}}\) day of \(\lambda \frac{1 \text{NL}}{\text{NL}}\), who produced \(\text{as identification.}\)
Control of the contro	Printed Notary Name
Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	Je soussigné, Monsieur Marc Van GORP: notaire à LYON, certifie que la signature apposée ci - desous émane de Novemen Uincent FRERING