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To:

Division of Corporations

Fax Number

: (850)617~6383

From:

Account Name

: BALDY MARTINEZ P.A.

Account Number : I20110000042

Phone

: (305)454-5804

Fax Number

: (305)454~5808

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Addre	5:				
Email Addre	s:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN O.R. PROPERTY INVESTMENT GROUP, LLC

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Fax: (306) 615-1371

COVER LETTER

TO:

Registration Section
Division of Cornorations

Division of Corporations			
O.R. PROPERTY INVESTME	ENT GROUP,	LLC	
Name of Lir	nited Liability Co	ompany	
Dear Sir or Madam:			
The enclosed Statement of Authority and fee(s) are s	submitted for filin	g.	
Please return all correspondence concerning this made	tter to the followi	ng:	
BALDY MARTINEZ, ESQ.			
Name of Person			
BALDY MARTINEZ, P.A.			
Firm/Company		_	Ta 5
1999 S.W. 27TH AVENUE, 1ST FLOOP	₹		
Address	<u> </u>	_	13 1
MIAMI, FL 33145			
City/State and Zip Code		_	7. STATE 1.
· E-mail address: (to be used for future annua	al report notificati	on)	
For further information concerning this matter, pleas	e call:		
BALDY MARTINEZ	305	454-5804	
Name of Person	Area Code	Daytime Telepl	ione 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

CR2E138 (2/14)

H160000282533

Fax: (306) 615-1371

To: +18508178383 Page 3 of 3 02/03/2016 9:12 AM

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this linauthority:	mited liability company submits the following statement of
FIRST: The name of the limited liability company is:	
O.R. PROPERTY INVESTMENT GROUP,	
SECOND: The Florida Document Number of the limite	ed liability company is: L15000182584
THIRD: The street address of the limited liability comp 9834 SW 26 TERR	
MIAMI, FL 33165	
	•
The mailing address of the limited liability co P.O. BOX 141062	
CORAL GABLES EL 33114	
	P E
May execute an instrument transferring rea a. Granted to: RICARDO FERN	I property held in the name of the company, ANDEZ
—· ·	of, or otherwise act for or bind, the company. NANDEZ
b. No authority granted to:	
(edig)	SEBASTIAN O CORTINAS
Signature of authorized representative Filing Fee: Certified C	Typed or printed name of signature \$25.00 opy: \$30.00 (optional)

CR2E138 (2/14)

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