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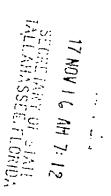
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' COVER LETTER

TO: Registration Section • Division of Corporations		
YPA LLC SUBJECT:		
	nited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are s	submitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
Joseph Paglino		
Name of Person		
Law Office of Joseph S. Paglino		
Firm/Company		
2131 Hollywood Boulevard, Suite 307		
Address		
Hollywood, Florida 33020		
City/State and Zip Code		
joe@paglinolaw.com		
E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter, pleas	se call:	
Joseph Paglino	954	921-1448
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registrati Division (P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, Florida 32314

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1). Florida Státutes, this limited liability company submits the follow authority:	ring statement of
FIRST: The name of the limited liability company is: YPA LLC	
SECOND: The Florida Document Number of the limited liability company is: L15000190463	3
THIRD: The street address of the limited liability company's principal office is: 2030 S. OCEAN DRIVE	
UNIT 926	•
HALLANDALE BEACH, FL 33009	•
The mailing address of the limited liability company's principal office is: 15 DENMARK CRESCENT	
TORONTO, ONTARIO	
CANADA M2R1J-3	
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: JULIO CLAVIJO	or to a specific
b. No authority granted to:	H 7: 1:2 FLORIDA
2. May enter into other transactions on behalf of, or otherwise act for or bind, the comp a. Granted to:	any.
b. No authority granted to:	-
ALEXANDER PERE	ELSTEIN
Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	f signature

CR2E138 (2/14)