

L15000204692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

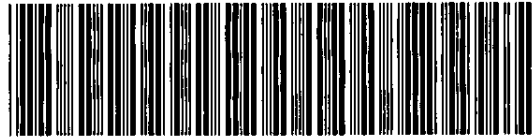
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEC 15 2015

3 MASON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Golani Bays, LLC

Signature

Requested by: Seth

12/11

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File _____
LTD Partnership File _____
Foreign Corp. File _____
L.C. File _____
Fictitious Name File _____
Trade/Service Mark _____
Merger File _____
Art. of Amend. File _____
RA Resignation _____
Dissolution / Withdrawal _____
Annual Report / Reinstatement _____
Cert. Copy _____
Photo Copy _____
Certificate of Good Standing _____
Certificate of Status _____
Certificate of Fictitious Name _____
Corp Record Search _____
Officer Search _____
Fictitious Search _____
Fictitious Owner Search _____
Vehicle Search _____
Driving Record _____
UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
Courier _____

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is:

GOLANI BAYS, LLC

SECOND: The Florida Document Number of the limited liability company is:

415000204692

THIRD: The street address of the limited liability company's principal office is:

1355 WEST 44TH PLACE, SUITE 100, HIALEAH, FLORIDA 33012

The mailing address of the limited liability company's principal office is:

1355 WEST 44TH PLACE, SUITE 100, HIALEAH, FLORIDA 33012

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.

a. Granted to: GOLANI INVESTMENTS, LLC, A DELAWARE LIMITED LIABILITY COMPANY

b. No authority granted to: _____

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

a. Granted to: GOLANI INVESTMENTS, LLC, A DELAWARE LIMITED LIABILITY COMPANY

b. No authority granted to: _____

Amir Hayun
Signature of authorized representative

AMIR HAYUN
Typed or printed name of signatory

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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