(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(D.,	siness Entity Nam	<u> </u>			
(Bu	siness Entity Nam	e)			
(Do	cument Number)				
Certified Copies	Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:				
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DEC 2 2 2015 S. YOUN

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, I	LLC			
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				Art of Inc. File
			1 —	LTD Durtnership File
				Foreign Corp. File
				L.C. File
				Figure Name File
				Trade/Service Mark
				Merger File
			X	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
Signature			-	Fictitious Owner Search
oignature .				Vehicle Search
			-	Driving Record
Requested by: SETH				UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
Name	Date	THIIC .	.	UCC 11 Retrieval
Walk-In	_ Will Pick U	Jp		Courier

STATEMENT OF AUTHORITY

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

FIRST: Thenar	me of the limited liability company is:		
G <u>OLANI BAYS, LLC</u>			
SECOND: The F	lorida Document Number of the limited lia	ability company is: L15000204692	
THIRD: The street	et address of the limited liability company	's principal office is:	
13	55 WEST 44 TH PLACE. SUITE 100, HIALEAH,	, FLORIDA 33012	-
<u> </u>			_
The ma	lling address of the limited liability compa	any's principal office is:	
13	55 WEST 44 TH PLACE. SUITE 100, HIALEAH,	FLORIDA 33012	SECOND BY
*****			C 21
FOURTH: This st position of a person person on the follo	atement of authority grants or sets limitati n in a company, whether as a member, tran wing:	ions of authority on all persons having nsferee, manager, officer or otherwise	the status or to a specific
I. May	execute an instrument transferring real pro	operty held in the name of the compa	ny.
а	. Granted to: <u>INFINITY PROPERTY N</u>	MANAGEMENT, INC. A FLORIDA	CORPORATION
			_
t	No authority granted to: GOLANI IN LIABILITY COMPANY	VESTMENTS, LLC, A DELAWA	RE LIMITED -
2. Mav	enter into other transactions on behalf of,	or otherwise act for or bind, the com	– pany.
a			
			_
b	No authority granted to: GOLANI IN LIABILITY COMPANY	VESTMENTS, LLC, A DELAWA	RE LIMITED -
		<u> </u>	
_AV	Lager	AMIR HAYUN	
Signature of author	ized representative Filing Fee:	Typed or printed name (\$25.00	of signature

Certified Copy: \$30.00 (optional)