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5/14/18

NAME:

MARTIN DOWNS SPORTS FACILITY LLC

TYPE OF FILING: STATEMENT OF AUTHORITY

COST:

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COVER LETTER

TO: Registration Section Division of Corporations		
Martin Downs Sports Facility LLC SUBJECT:		
Name of Limited Liability Com	pany	
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	:	
Robert J. Moriarty, Jr.		
Name of Person		
Marsh, Moriarty, Ontell & Golder, P.C.		
Firm/Company		
18 Tremont Street - Suite 900		
Address		n.
Boston, Massachusetts 02108	All RAY III	-
City/State and Zip Code		يقصين المستون
rmoriarty@mmoglaw.com		¥ ž
E-mail address: (to be used for future annual report notification		N
For further information concerning this matter, please call:		٥ ا
Robert J. Moriarty, Jr. 617	778-5100	-
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

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

STATEMENT OF AUTHORITY

authority	to section 605.0302(1), Florida Statutes, this limited liability company submits the following:	_	ent of
FIRST:	The name of the limited liability company is: Martin Downs Sports Facility LLC	<u> </u>	
SECON	D: The Florida Document Number of the limited liability company is:	64	
	The street address of the limited liability company's principal office is: 500 Harrison Avenue		
	Boston, Massachusetts 02118		
	The mailing address of the limited liability company's principal office is: 500 Harrison Avenue	(1) (2)	AN HILL AN
	Boston, Massachusetts 02118		7
position	H: This statement of authority grants or sets limitations of authority on all persons having to fa person in a company, whether as a member, transferee, manager, officer or otherwise on the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: Mario Nicosia	r to a spe	رن خ-
	b. No authority granted to:any others		
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the compara. a. Granted to: Mario Nicosia	ny.	
	b. No authority granted to:		
Ma	nd Micosia Mario Nicosia		
Signature	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	signature	