

L16000034793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JUN 08 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Alpine Real Estate Management LLC
Name of Limited Liability Company

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:

William J. Anderson, Esq.

Name of Person

William J. Anderson, P.A.

Firm/Company

101 NE 3rd Ave., Suite 1500

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

mkam1318@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Mkam

Name of Person

at (754) 281-2300

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

CR2E138 (2/14)

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: Alpine Real Estate Management LLC

SECOND: The Florida Document Number of the limited liability company is: L16000034793

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

12349 NW 55th St.

Coral Springs, FL US 33076

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

12349 NW 55th St.

Coral Springs, FL US 33076

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: Mike Mkam

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: Mike Mkam

b. No authority granted to: _____

Authenticon

Yossi Perelman

Signature of authorized representative

Yossi Perelman

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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