L16000073451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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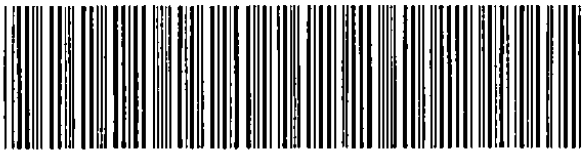

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CORPORATE ACCESS, INC.

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XX **CERTIFIED COPY** _____

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XX **FILING** STATEMENT OF AUTHORITY LLC

1. CARTERET, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **CARTERET, 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:

LEA ELOISE MARGOLIS
Name of Person

CARTERET, LLC
Firm/Company

915 NW 1 AVENUE, UNIT # L-302
Address

MIAMI, FLORIDA 33163
City/State and Zip Code

LEAMARGOLIS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEA ELOISE MARGOLIS at (305) 676-1245
Name of Person — Area Code — Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: CARTERET, LLC

SECOND: The Florida Document Number of the limited liability company is: L16000073456

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

915 NW 1 AVENUE, UNIT # L-302

MIAMI, FLORIDA 33136

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

915 NW 1 AVENUE, UNIT # L-302

MIAMI, FLORIDA 33136

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: LEA ELOISE MARGOLIS

   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 : LEA ELOISE MARGOLIS

   b. No authority granted to:

FILED
2016 MAY 14 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Herve Margolis

Sophie Jeanne Lea Margolis

Lea Eloise Margolis

Xavier Paul Olivier Margolis