116000095532

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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COVER LETTER

Division of Corporations		
SANKAR GLOBAL, LLC		
	mited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
TATIANA PUCHE		
Name of Person		
PATRICIA L. PEREZ, P.A.		
Firm/Company		
5901 SW 74 STREET, SUITE 213A		
Address	•	
SOUTH MIAMI, FL 33143		
City/State and Zip Code		
TATIANA@PLPLAW.NET		
E-mail address: (to be used for future annual	ual report notification)
For further information concerning this matter, plea	ase call:	
TATIANA PUCHE	786	485-0778
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS:		G ADDRESS:
Registration Section Division of Corporations		on Section of Corporations
Clifton Building	P.O. Box	6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahass	ee, Florida 32314

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: SANKAR GLOBAL LLC

SECOND: The Florida Document Number of the limited liability company is: <u>L16000095532</u>

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

900 Little River Drive, Miami, Florida 33150

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

900 Little River Drive, Miami, Florida 33150

Abdulrahim Sankar

FOURTH: This statement of authority grants or sets limitations of authority having the status or position of a person in a company, whether as a member		~3
manager, officer or otherwise or to a specific person on the following:	,	11/14
1. May execute an instrument transferring real property held in the name of t	he company	. 62
a. Granted to: Anas Sankar and Abdulrahim Sankar	<u> </u>	4 3
b. No authority granted to: N/A	52	W
	37-	₩/I
a. Granted to: Anas Sankar and Abdulrahim Sankar b. No authority granted to: N/A		<u> </u>
Authorized Representatives:		
Anas Sankar Date: May	15,20	217
Date: 1000	15 201	1