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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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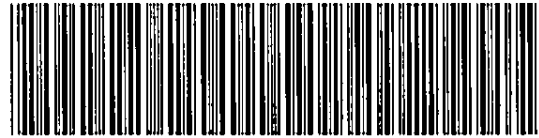
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sara48 Properties, 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:

Jerome S. Levin

Name of Person

Levin Law, LC

Firm/Company

1444 First Street, Suite A

Address

Sarasota, FL 34236

City/State and Zip Code

linda@levinmediation.com

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

For further information concerning this matter, please call:

Jerome S. Levin

at (

941

953 5300

)

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


Prepared by and Return To:

Levin Law  
1444 First Street, Ste. A  
Sarasota, FL 34236

STATEMENT OF AUTHORITY

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

- FIRST: The name of the limited liability company is: **SARA48 PROPERTIES, LLC**
- SECOND: The street address of the limited liability company's principal office is: **1221 1<sup>st</sup> Street, Sarasota, FL 34236**
- The mailing address of the limited liability company's principal office is: **1221 1<sup>st</sup> Street, Sarasota, FL 34236**
- THIRD: 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, agent 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: **Jerome Levin, Esq. 1444 First Street, Suite A, Sarasota, Florida 34236**
    - b. No authority granted to:
  2. May enter into other transactions on behalf of, or otherwise act to bind the company.
    - a. Granted to: **Jerome Levin, Esq. 1444 First Street, Suite A, Sarasota, Florida 34236**
    - b. No authority granted to:
  3. May delegate authority to third persons by written document to act on behalf of said person.
    - a. Granted to: **Jerome Levin, Esq. 1444 First Street, Suite A, Sarasota, Florida 34236**
    - b. No authority granted to:

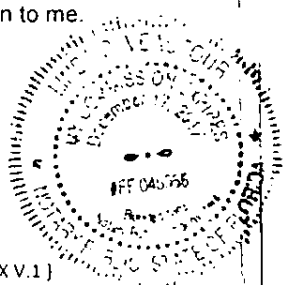
  
\_\_\_\_\_  
Signature of Authorized representative

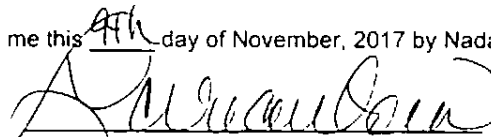
Nadav Haetzni  
\_\_\_\_\_  
Print Name

I hereby attest that this is a certified copy of the written document.

State of Florida  
County of Sarasota

The foregoing instrument was acknowledged before me this 9th day of November, 2017 by Nadav Haetzni, who are personally known to me.



  
\_\_\_\_\_  
Notary Public