

L16000128344

(Requestor's Name)

(Address)

(Address)

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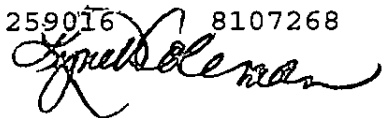
S Warren

AUG 19 2016

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 259016 8107268

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : August 18, 2016

ORDER TIME : 12:07 PM

ORDER NO. : 259016-005

CUSTOMER NO: 8107268

DOMESTIC AMENDMENT FILING

NAME: BISCAYNE BOULEVARD PROPERTY
OWNER, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BISCAYNE BOULEVARD PROPERTY OWNER, 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:

Paul R. DeFilippo, Esq.

Name of Person

Wollmuth Maher & Deutsch LLP

Firm/Company

500 Fifth Avenue

Address

New York, New York 10110

City/State and Zip Code

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

For further information concerning this matter, please call:

Paul R. DeFilippo, Esq.

Name of Person

at (212) 382-3300

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

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: BISCAYNE BOULEVARD PROPERTY
OWNER, LLC

SECOND: The Florida Document Number of the limited liability company is: L16000128344

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

333 Earle Ovington Blvd., Suite 900

Uniondale, New York 11553

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

333 Earle Ovington Blvd., Suite 900

Uniondale, New York 11553

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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: _____

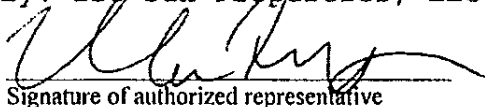
b. No authority granted to: any member, transferee, manager,
officer, or any other person absent the written consent of all members

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: _____

b. No authority granted to: any member, transferee, manager,
officer, or any other person absent the written consent of all members

By: 1st Sun Properties, LLC, Member


Signature of authorized representative

Marc Franzman

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)