

L16000 177462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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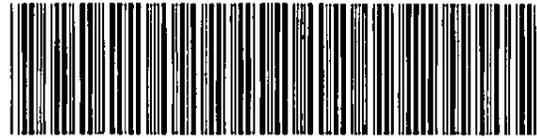
(Business Entity Name)

(Document Number)

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D. SCOTT  
JAN 7 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 900 FLAGLER 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:

Walter L. Morgan

Name of Person

Morgan, Olsen & Olsen, LLP

Firm/Company

633 S. Federal Highway, #400A

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

agrunspan@carltonfields.com

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

For further information concerning this matter, please call:

Walter L. Morgan

Name of Person

954

Area Code

695-2082 Cell

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

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TALLAHASSEE, FLORIDA

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: 900 FLAGLER LLC

SECOND: The Florida Document Number of the limited liability company is: L16000177462

THIRD: The street address of the limited liability company's principal office is:  
900 N. Flagler Drive  
Fort Lauderdale, FL 33304

The mailing address of the limited liability company's principal office is:  
290 NE 68th Street  
Miami, FL 33138

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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: Alan Grunspan

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: Alan Grunspan

b. No authority granted to: \_\_\_\_\_

Walter L. Morgan  
Signature of authorized representative

Walter L. Morgan, Esq.  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)