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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations

KATZ INVESTMENT HOLDINGS, LLC

SUBJECT:

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:

Melinda Osborne, Real Estate Paralegal

Name of Person

Sapurstein & Bloch, P.A.

Firm/Company

9700 South Dixie Hwy., #1000

Address

Miami, Fl. 33156

City/State and Zip Code

katzron@hotmail.com

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

For further information concerning this matter, please call:

Melinda Osborne	305	670-9500
	at ()	
Name of Person	Area Code	Davtime 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

CR2E138 (2/14)

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: KATZ INVESTMENT HOLDINGS, LLC

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

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

12927 SW 103 PLACE

MIAMI, FL. 33127

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

12927 SW 103 PLACE

MIAMI, FL. 33127

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: RON KATZ AND/OR JAN S. KATZ

b. No authority granted to: _____

May enter into other transactions on behalf of, or otherwise act for or bind, the company.
a. Granted to : <u>RON KATZ AND/OR JAN S. KATZ</u>

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b. No authority granted to:

Ŵ			RON KATZ
Signature of authorized representative		* 35.00	Typed or printed name of signature
\backslash	Filing Fee: Certified Copy:	\$25.00 : \$30.00 ((optional)
CR2E138 (2/14)			