6/30/2017



Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: GULATI LAW

Account Number : I20130000014

Phone

(407)900-5054

Fax Number

: (407)517-4931

**Enter the email address for this business entity to be used for Fature annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ROCKHUIS XI LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Retimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

S. WARREN JUL 03 2017

TO:

Registration Section **Division of Corporations**

SPIN 164 '4'		
SUBJECT:	Name of Limited Liability Com	pany
Dear Sir or Madam:		
The enclosed Statement of Authority an	d fee(s) are submitted for filing.	
Please return all correspondence concer	ning this matter to the following:	1
Sarah Gulati		
Name of Perso	n	
Premier Florida Title, LLC		
Firm/Company	,	
479 Montgomery Place		
Address		•
Altamonte Springs, FL 32714	•	
City/State and Zip Co	de	
info@premierfloridatitle.com		
E-mail address: (to be used for	future annual report notification	1)
For further information concerning this	matter, please call:	
Sarah Gulati	407	900-5054
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 Tallahassoe, Florida 32314

STATEMENT OF AUTHORITY

authority: FIRST: The name o	f the limited liability company is: ROCKHUIS XI LLC		
		 7	
SECOND: The Flor	ida Document Number of the limited liability company is: L1600022316		
	address of the limited liability company's principal office is:		
SUITE 1	77	•	
MIRAMA	R, FL 33027	-	*
The mailin	ng address of the limited liability company's principal office is:	•	
MIAMI, F	L 33164	•	
		•	
1. May ex	ecute an instrument transferring real property held in the name of the compan Granted to: Les Laroche	y. -	
b.	No authority granted to:	SECOLUTION OF THE SECOND OF TH	17 JUN 30
2. May en	iter into other transactions on behalf of, or otherwise act for or bind, the comp	NSSE,	130 AM
ā.	Granted to: Les Laroche	ESTA STS	ڣ
b.	No authority granted to:	ADA TE	35
fig.	Les Laroche	-	
Signature of authoriz	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	f signatu	ite

CR2E138 (2/14)