

416000224055

(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: UNIT 2400 PROPERTY 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:

Arturo J. Bravo, Esq.

Name of Person

Crosswise, PLLC

Firm/Company

1600 Ponce de Leon Blvd Suite 1105

Address

Coral Gables, FL 33134

City/State and Zip Code

team@crosswise.legal

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

For further information concerning this matter, please call:

Arturo Bravo

Name of Person

786
at (_____) _____

Area Code

3742372

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: Unit 2400 Property, LLC

SECOND: The Florida Document Number of the limited liability company is: L16000224055

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

1080 Brickell Avenue, Suite 2400, Miami FL 33131

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

1080 Brickell Avenue, Suite 2400, Miami FL 33131

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.

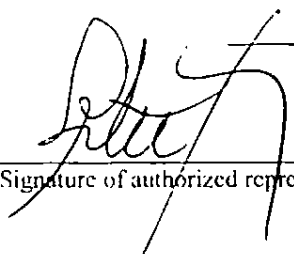
a. Granted to: Property Management Desk, LLC

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: Property Management Desk, LLC

b. No authority granted to: _____



Signature of authorized representative

Arturo J. Bravo, Esq.

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

18 JAN 29 PM 2:49
CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA
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