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APR 1 3 2017 Y SULKER TO: Registration Section Division of Corporations

PHOENIX RISING 3565 BALBOA 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:

Sarah Grieb, Esquire

Name of Person

Roetzel & Andress, LPA

Firm/Company

850 Park Shore Drive - Third Floor

Address

Naples, Florida 34103

City/State and Zip Code

victor@sfllp.com

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

For further information concerning this matter, please call:

Sarah Grieb, Esquire		239	649-6200
	at ()
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 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: ______PHOENIX RISING 3565 BALBOA LLC

	address of the limited liability company's principal office is: RICKELL AVENUE	
PH 200)	
MIAMI,	FL 33131	_
	ing address of the limited liability company's principal office is: RICKELL AVENUE	
PH 200	2	
MIAMI,	FL 33131	_
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b.	No authority granted to:	54 59
2. May e a.	enter into other transactions on behalf of, or otherwise act for or bind, the con Granted to :	— npany. —
	No authority granted to:	_
b.		

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