L17000112510

Office Use Only



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10/04/17--01022--010 **25.00

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O SIMMONS OCT 0 4 2017

COVER LETTER

FO: Registration Section Division of Corporations		
MOISES PROPERTY LLC		
SUBJECT: Name of Li	mited Liability Com	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	itter to the following	:
BARRY L SIMONS		
Name of Person	 	
LAW OFFICE OF BARRY L SIMONS		
Firm/Company		
9100 SOUTH DADELAND BLVD., SUI	TE 400	
Address		
MIAMI FL 33156		
City/State and Zip Code		
BARRY@BARRYSIMONS.COM		
E-mail address: (to be used for future annu-	ial report notification	n)
For further information concerning this matter, plea	se call:	
BARRY L SIMONS	305 at (670-7020
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 see, Florida 32314

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

Pursuan authority	t to section 605.0302(1), Florida Statutes, this limited liability company submits the following:	ig statement of
FIRST:	The name of the limited liability company is: MOISES PROPERTY LLC	
secon	D: The Florida Document Number of the limited liability company is: L17000112510	
	: The street address of the limited liability company's principal office is: C/O 9100 S. DADELAND BLVD.	
	SUITE 400	
	MIAMI FL 33156	
	The mailing address of the limited liability company's principal office is: C/O 9100 S. DADELAND BLVD.	
	SUITE 400	兴 古 一
	MIAMI FL 33156	Det L
position	 This statement of authority grants or sets limitations of authority on all persons having to a person in a company, whether as a member, transferee, manager, officer or otherwise on the following: May execute an instrument transferring real property held in the name of the company. a. Granted to: 	r to a specific P
	b. No authority granted to:	
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comparation at the comparation of the com	ıy.
	b. No authority granted to:	
Signati	BARRY L SIMONS Typed or printed name of s	signature
•	Filing Fee: \$25.00	

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)