## 117000115212

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## COVER LETTER

Registration Section

TO:

Div	rision of Corporations					
SUBJECT:	PERYDEL REAL ESTATE LLC					
JOHN LETT		ed Liability Comp	pany			
Dear Sir or I	Madam:					
The enclosed	d Statement of Authority and fee(s) are sub	mitted for filing.				
Please return	all correspondence concerning this matter	r to the following:				
JULIE G	COHEN					
	Name of Person					
STROCK	& COHEN ZIPPER LAW GROU	JP PA				
	Firm/Company					
2900 GL	ADES CIR STE 750					
-	Address					
WESTON	N, FL 33327					
	City/State and Zip Code					
JCOHEN	@STROCKLAW.COM					
Е-г	mail address: (to be used for future annual	report notification	)			
For further in	nformation concerning this matter, please	call:				
JULIE G	COHEN	954	659-2220			
	Name of Person	Area Code	Daytime Telephone Number			
Reg Div Cli	REET/COURIER ADDRESS: gistration Section rision of Corporations fton Building LE Executive Center Circle	Registrati Division ( P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314			

Tallahassee, Florida 32301

## STATEMENT OF AUTHORITY

FIRST: The name of the limited liability company is:  PERYDEL REAL ESTATE LLC  SECOND: The Florida Document Number of the limited liability company is:  L17000115212  THIRD: The street address of the limited liability company's principal office is:  1332 PLUMOSA WAY  WESTON, FL 33327  The mailing address of the limited liability company's principal office is:  1332 PLUMOSA WAY  WESTON, FL 33327  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, transferce, 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:  FRANCISCO JOSE PEREZ DELGADO  b. No authority granted to:  FRANCISCO JOSE PEREZ DELGADO  b. No authority granted to:  FRANCISCO JOSE PEREZ DELGADO  FRANCISCO JOSE PEREZ DELGADO  SECONDARY  Francisco Perez Correct  Julia Delgadode Perez  Typed or printed name of signature  Typed or printed name of signature	authority	<b>/</b> :	. , ,		ed liability company submits the fo	•
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b. No authority granted to:    Francisco   Francisco		ь.	No authority gran	eted to:		Luj Co
Francisco Perez Contalez  Julia Delgado de Perez  Signature of authorized representative  Typed or printed name of signature		•		· · · · · · · · · · · · · · · · · · ·	·	STAY. 2
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Signature of authorized representative Typed or printed name of signature	Hva	Klast	WI Jo-		Francisco Perez	2 Gonzalez
Certified Copy: \$30.00 (optional)	Signature	e of authoriz	ed representative	Filing Fee:	Typed or printed nan \$25.00	

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