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#### **COVER LETTER**

TO: Registration Section Division of Corporations		•
DWG PROPERTY TAMPA LLC SUBJECT:		
Name of L	imited Liability C	ompany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filin	ng.
Please return all correspondence concerning this ma	atter to the following	ing:
Carlos J. Villaneva, Esq.		
Name of Person		
Carlos J. Villanueva P.A.		
Firm/Company		<del></del>
2525 Embassy Drive, Suite 16		
Address		<u> </u>
Cooper City, Florida 33026		
City/State and Zip Code	<del></del>	_
cvillanueva@unaley.com		
E-mail address: (to be used for future annu	ual report notificat	ion)
For further information concerning this matter, plea	ase call:	
Carlos J. Villanueva, Esq.	954	433-9600

954

Area Code

## Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Name of Person

## **Street Address:**

433-9600

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Daytime Telephone Number

### STATEMENT OF AUTHORITY

Pursuant authority	t to section 605.0302(1), Florida Statutes, this limited liability company submits the followi y:	ng statemer	it of
FIRST:	The name of the limited liability company is:  DWG PROPERTY TAMPA LLC		<del></del>
SECON	(D: The Florida Document Number of the limited liability company is:		_ <del></del>
THIRD	2: The street address of the limited liability company's principal office is: 999 SW 1st Avenue, Suite 1717		
	Miami, Florida 33130		
	The mailing address of the limited liability company's principal office is:  999 SW 1st Avenue, Suite 1717		
	Miami, Florida 33130		
position	TH: This statement of authority grants or sets limitations of authority on all persons having a of a person in a company, whether as a member, transferee, manager, officer or otherwise on the following:  1. May execute an instrument transferring real property held in the name of the company a. Granted to:  HAIHUI ZHU	or to a special control of the special contro	ific
	b. No authority granted to:	PM 1:33	C
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comp  a. Granted to:  HAIHUI ZHU	any.	
	b. No authority granted to:		
	JIJIANG ZHU		
Signatu	re of authorized representative  Filing Fee: \$25.00  Certified Conv. \$30.00 (optional)	f signature	