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SIMON & SIGALOS LLP
Division of Corporations
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To: Division of Corporations
Fax Number : (850)417-5303

From: Account Name : SIMON & SIGALOS, LLP
Account Number : I19898000176
Phone : (561)447-0017
Fax Number : (561)447-0018

Enter the email address for this business entity to be used for future annual report filings. Enter only one email address please.

Email Address: _____

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BROOKEVILLE ASSOCIATES LLC

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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: BROOKEVILLE ASSOCIATES LLC

SECOND: The Florida Document Number of the limited liability company is: L17000233478

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

4730 NW 2ND AVENUE, STE 100
BOCA RATON, FL 33431

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

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.

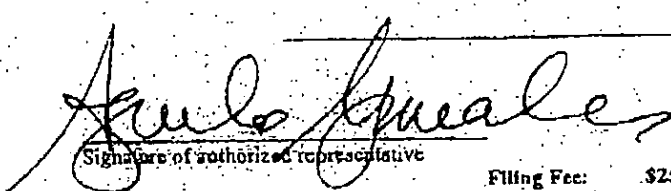
a. Granted to: _____

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: BHAVIN SHAH

b. No authority granted to: _____


Signature of authorized representative

Typed or printed name of signature

AGNELO GONSALVES

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