117000245342

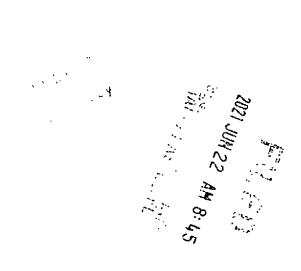
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Certified Copies	Certificate	es of Status
Special Instructions to	o Filing Officer:	

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COVER LETTER

Di	vision of Corporations	~	
SUBJECT:	KALA 23 LLC		
		imited Liability Co	mpany
Dear Sir or	Madam:		
The enclose	d Statement of Authority and fee(s) are	submitted for filing	₹.
Please retur	n all correspondence concerning this m	atter to the followir	ß:
Jorge Sanc	nez-Galarтaga		
	Name of Person		-
Sanchez-G	alarraga, P.A.		_
	Firm/Company		-
1313 Ponce	e de Leon Boulevard, Suite 301		
	Address	<u>-</u>	_
Coral Gabl	es., Florida 33134		
	City/State and Zip Code	 .	_
jsg@sgpala	aw.com		
E-	mail address: (to be used for future ann	ual report notificati	on)
For further	information concerning this matter, ple	ase call:	
Jorge Sanc	hez-Galarraga	305 at (445-5351
	Name of Person	Area Code	Daytime Telephone Num

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

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



June 18, 2021

Via FedEx

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Florida 32302

Re: Kala 23 LLC - L17000245342

Ladies and Gentlemen:

Enclosed is a Statement of Authority to be filed for the limited liability company in reference as well as our check for \$55.00 for the filing fee and for a certified copy.

Kindly return the certified copy to us using the enclosed FedEx envelope.

Sincerely,

Jorge Sanchez-Galarraga

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: KALA 23 LLC SECOND: The Florida Document Number of the limited liability company is: L17000245342 THIRD: The street address of the limited liability company's principal office is: 243 N.W. South River Drive Miami, Florida 33128 The mailing address of the limited liability company's principal office is: 243 N.W. South River Drive Miami, Florida 33128 FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status position of a person in a company, whether as a member, transferee, manager, officer or otherwise of to a specific person on the following: 1. May execute an instrument transferring real property held in the name of the company? Jorge Sanchez-Galarraga, 1313 Ponce de Leon Boulevard, Suite 301, Coral Gables, Florida 33134 b. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: _ Jorge Sanchez-Galarraga, 1313 Ponce de Leon Boulevard Suite 301, Coral Gables, Florida 33134 No authority granted to: Guillermo Martinez Lluch

\$25,00

Certified Copy: \$30.00 (optional)

Filing Fee:

Typed or printed name of signature

CR2E138 (2/14)

Signature of authorized representative