## 118000 163770

(Re	equestor's Name)			
(Ad	Idress)			
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



300346777703

06/30/20--01007--009 \*\*30.00

RECEIVED

JUN 29 2020

12.22



## COVER LETTER

то:	Registration Section Division of Corporations	*	:	
SUBJ	PARK EAST HOLDINGS, LLC			
20120	Name of Limited	d Liability C	ompany	
Dear S	ir or Madam:			1
The er	closed Statement of Authority and fee(s) are subm	nitted for fili	ng,	(fective
Please	return all correspondence concerning this matter	to the follow	ing:	1/10
BRI	AN ROSE			Effective 6/26/20
	Name of Person		<del></del> ,	
PAF	K EAST HOLDINGS, LLC			
	Firm/Company			
111	S. ARMENIA AVE.: SUITE 201			
	Address			
TAN	1PA, FL 33609			
•	City/State and Zip Code		<del></del>	
BRO	SE@EISENHOWERPROPERTYGROUP.COM			
	E-mail address: (to be used for future annual re	port notifica	tion)	
For fu	ther information concerning this matter, please ca	ill:		
BRI	AN ROSE	813	610-3043	
-	Name of Person	Area Cod	le Daytime Teler	phone Number

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

## STATEMENT OF AUTHORITY

Pursuant to section 605.03 authority:	302(1), Florida Statutes, this lin	mited liability company submits the following	ng statement of
FIRST: The name of the	limited liability company is: _	PARK EAST HOLDINGS, LLC	
SECOND: The Florida I	Document Number of the limite	ed liability company is: L18000163770	
THIRD: The street addre	ess of the limited liability comp NIA AVE.	pany's principal office is:	
SUITE 201			
TAMPA, FL 3	3609		
The mailing ad	dress of the limited liability co	ompany's principal office is:	
SUITE 201			
TAMPA, FL 3	3609		
	=	al property held in the name of the company.	7.2.2
b. No	authority granted to:		55 F.: 55
·	nto other transactions on behal inted to :NICHOLAS J. DIS	f of, or otherwise act for or bind, the compar STER	5-3
b. No	authority granted to:		
1		JEFFERY S. HILLS	
Signature of authorized re	Filing Fee:	Typed or printed name of s \$25.00 Copy: \$30.00 (optional)	signature

CR2E138 (2/14)