

1180000180062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

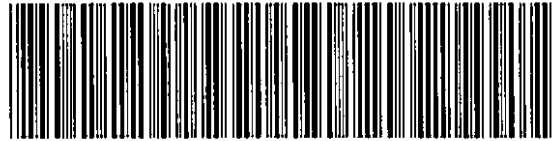
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

AS  
9-11-18

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CORAL 13, LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melinda Osborne, Real Estate Paralegal

\_\_\_\_\_  
Name of Person

Sapurstein & Bloch, P.A.

\_\_\_\_\_  
Firm/Company

9700 South Dixie Hwy., #1000

\_\_\_\_\_  
Address

Miami, FL 33156

\_\_\_\_\_  
City/State and Zip Code

jperlmutter@fnbsm.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melinda Osborne

305

670-9500

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

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: CORAL 13, LLC

SECOND: The Florida Document Number of the limited liability company is: L18000180062

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

1510 Trillo Avenue

Coral Gables, Fl. 33146

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

1510 Trillo Avenue

Coral Gables, Fl. 33146

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: JORDAN PERLMUTTER

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: JORDAN PERLMUTTER

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

JORDAN PERLMUTTER  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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2018 SEP -4 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FL