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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLORELICE LLC

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FLORIDA DEPARTMENT OF STATE Division of Corporations

CLORELICE LLC 1201 E. PONCE DE LEON BLVD. APT. 206 CORAL GABLES, FL 33134US

SUBJECT: CLORELICE LLC

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STATEMENT OF AUTHORITY					
Pursuant authority		05.0302(1), Florid	la Statutes, this limited l	iability company submits the follo	owing statement of
PIRST:	The name of	f the limited liabil	lity company is:	ELICE LLC	,
SECON	D: The Flori	ida Document Nui	mber of the limited liab	ility company is: L190001967	752
	The street address of the limited liability company's principal office is: 8925SW 148th Street, Suite 210, Palmetto Bay, Florida 33176				
					<del>_</del>
	The mailin	g address of the li	imited liability company	's principal office is:	_
	1201 E. Pon	ce de Leon Blvd.,	, Apt 206, Coral Gables,	FL 33134	<del>-</del>
					<del></del>
position of person of	of a person is n the followi	n a company, whe ng: ccute an instrumen	ether as a member, transf nt transferring real prope	ns of authority on all persons haviferee, manager, officer or otherwierty held in the name of the compa	se or to a specific
	b.	No authority gra	nted to:		<del>-</del>
	2. May en	ter into other trans	sactions on behalf of, or	otherwise act for or bind, the cor	прапу.
	8.	Granted to:			<del></del>
	b.	No authority gran	nted to:		<del>-</del>
	Louid		<u> </u>	<u>,</u>	<del></del>
	Milk			Gerard Malassis, Manag	er
Signature	of authoriza	ed representative	<del></del>	Typed or printed name	of signature