L19000221860

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	JASSODA ENTERPRISES, LLC		
0000	Name of Limited Liability Cor	npany	
Dear S	ir or Madam:		
The en	closed Statement of Authority and fee(s) are submitted for filing	Ţ.	
Please	return all correspondence concerning this matter to the followin	g:	
	Julie Ayers Name of Person	_	
	Merideth Nagel, P.A.	_	
	201 W. Highway 50	_	
(City/State and Zip Code	_	
	NIA		
For fur	E-mail address: (to be used for future annual report notification ther information concerning this matter, please call:	2021 MA) TALL	· _d =
	Julie Ayers at 352 Name of Person Area Code	Daytime Telephone Number	بر ا ا ا ا ا
	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 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority: SECOND: The Florida Document Number of the limited liability company is: L19000221860 THRD: The street address of the limited liability company's principal office is: 8507 Rose Groves Road Orlando, FL 32818 The mailing address of the limited liability company's principal office is: 8507 Rose Groves Road Orlando, FL 32818 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. Granted to: Subhas C. Sawh and Asif Kassim, individually or jointly b. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: b. No authority granted to: Annil C. Sawh Signature of authorized representative Typed or printed name of signature Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)