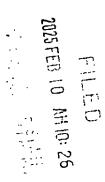


(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to F	Filing Officer:	
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CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 + Tallahassee, Florida 32301 (850) 224-8870 + 1-800-342-8062 + Fax (850) 222-1222

1201 CLEVELAND AVE, LLC	·
Please Debit FCA000000003 For: 55	
Thank you Seth Neelcy	
Stal	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 Pile
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

STATEMENT OF AUTHORITY

IRST: The name	of the limited liability	company is: 1201 C	LEVELAND AVE, LLC
ECOND: The Fi	orida Document Numb	per of the limited liabi	lity company is:
HIRD: The stree	et address of the limited lst Ave. # 205		
MIAMI, 1	1, 33137		
	ling address of the limi	ited liability company	
MIAMI, F			·
rson on the follov	ving: xecute an instrument to	ransferring real prope	erce, manager, officer or otherwise or to a specifi
b.	No authority granted	d to:	
		tions on behalf of, or OR GONZALEZ	otherwise act for or bind, the company.
b.	No authority granted	d to:	
			1201 CEEVELIANTI MI, ELC, MANAGER BY: T.D.G. ENTERPRISE, LLC, its MANAGER BY: LUKATONI, E.L.C, its Manager
\bigcirc			By: ALBERTO DICHI, MANAGER