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## COVER LETTER

TO: Registration Section Division of Corporations

WOTP VII, 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:

Michael Bernstein

Name of Person

The Bernstein Law Firm

Firm/Company

3050 Biscayne Boulevard, SUite 403

Address

Miami, FL 33137

City/State and Zip Code

dtamir@msn.com

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

For further information concerning this matter, please call:

 Michael I. Bernstein
 305
 672-9544

 Name of Person
 Area Code
 Daytime Telephone 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

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## STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited fiability company submits the following statement of authority:

**FIRST:** The name of the limited liability company is:

SECOND: The Florida Document Number of the limited liability company is: 12000216676
THIRD: The street address of the limited liability company's principal office is:
411 WASHINGTON AVENUE
MIAMUBEACH, FLORIDA 33139

The mailing address of the limited liability company's principal office is: 411 WASHINGTON AVENUE

MIAMI BEACH, FLORIDA 33139

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:\_\_\_\_\_\_

agreement

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

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2. May enter into other transactions on behalf of, or otherwise act for or bind, the company,

a. Granted to : any Manager to conduct day-to-day operations only otherwise ONLY by unanimous Board Vote pursuant to operating agreement

b. No authority granted to:

Signature of authorized representative

Michael I. Bernstein, Auth. Signatory

Typed or printed name of signature

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

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