L23000230111

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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COVER LETTER

TO:		istration Section ision of Corporations	
SUBJE	СΤ٠	Caribbean Isles Holdings, LLC	
.,00,00		Name of Limited Liability (Company
Dear Sit	r or N	Aadam:	
The enc	losed	Statement of Authority and fee(s) are submitted for fil	ling.
Please r	eturn	all correspondence concerning this matter to the follow	wing:
John N.	. Bec	k, Esq., LL.M., MBA	
		Name of Person	
Colen &	& Wa	igoner, P.A.	
		Firm/Company	
1756 N	. Bel	cher Road	
		Address	 -
Clearw	ater.	F1. 33765	
		City/State and Zip Code	
john@d	colen	wagoner.com	
	E-n	nail address: (to be used for future annual report notific	cation)
For furt	her ii	nformation concerning this matter, please call:	
John B	eck	727 at (545-8114)
		Name of Person Area Co	ode 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

CR2E138 (2/14)

STATEMENT OF AUTHORITY

authority		ving statement of
FIRST:	The name of the limited liability company is: Caribbean Isles Holdings, LLC	
SECON	D: The Florida Document Number of the limited liability company is:	
THIRD:	The street address of the limited liability company's principal office is: 8027 81st Street, Largo, FL 33777	
		2025 F1
	The mailing address of the limited liability company's principal office is:	2005 FEB 10 PM 4: 42
	845 Bay Point Dr Madeira Beach, FL 33708	H I I
		- Dr. 10 -
position	H: This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise in the following:	g the status or c or to a specific
	1. May execute an instrument transferring real property held in the name of the compa-	ny.
	a. Granted to:	_
	b. No authority granted to:	-
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the com	- pany.
	a. Granted to: Bryan Michael Khan	_
	b. No authority granted to:	- -
	Ranjan Z Khan Ranjan Zacharia Khan, N	– Ianager
Signatur	e of authorized representative Typed or printed name	
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

CR2E138 (2/14)