L96000000992

(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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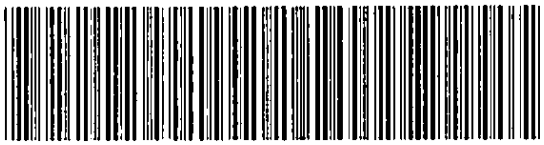

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FILED
2022 MAY -6 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2022 MAY -6 PM 12:01
ALLAHASSEE, FLORIDA

Statement of Authority

MAY 10 2022

D CONNELL

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 5/6/22

WALK IN

ENTITY NAME HEM-ONC PROPERTIES II LLC

DOCUMENT NUMBER

PLEASE FILE THE ATTACHED AND RETURN

XXXX Plain Copy

____ Certified Copy

____ Certificate of Status

____ ____

PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY

____ Certified Copy of Arts & Amendments

____ Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

____ Certificate of Status

____ Certificate of Status Reflecting: ____

APOSTILLE' / NOTARIAL CERTIFICATION

COUNTRY OF DESTINATION ____

NUMBER OF CERTIFICATES REQUESTED ____

TOTAL OWED $ 25

ACCOUNT # I20140000108
United Corporate
Services, Inc.

Keith Keppard

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HEM-ONC PROPERTIES, L.C.
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:

Stewart M. McGough, Esq.
Name of Person

Scolaro Fetter Grizanti & McGough, P.C.
Firm/Company

507 Plum St., Ste. 300
Address

Syracuse, NY 13204
City/State and Zip Code

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

For further information concerning this matter, please call:

Stewart M. McGough, Esq. at (315) 471-8111
Name of Person — Area Code — Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

CR2E138 (2/14)

STATEMENT OF AUTHORITY

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

FIRST: The name of the limited liability company is: HEM-ONC PROPERTIES, L.C.

SECOND: The Florida Document Number of the limited liability company is: L96000000992

THIRD: The street address of the limited liability company's principal office is:

1871 SE TIFFANY AVENUE

SUITE 100

PORT SAINT LUCIE, FL 34952

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

1871 SE TIFFANY AVENUE

SUITE 100

PORT SAINT LUCIE, FL 34952

FILED
2022 MAY -6 AM 9:54

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: NICHOLAS IANNOTTI
   b. No authority granted to: ALL OTHER MEMBERS
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
   a. Granted to: NICHOLAS IANNOTT
   b. No authority granted to: ALL OTHER MEMBERS

X _____
Signature of authorized representative

NICHOLAS IANNOTTI
Typed or printed name of signature

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

CR2E138 (2/14)