

L100000 29737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

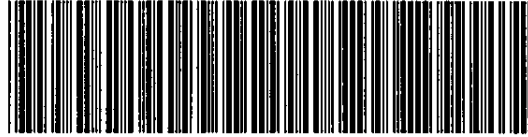
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 FEB 10 AM 8:59
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

J. G. Stevens FEB 18 2015

\$ 55 Enclosed

for

Filing Fee
+

Certified Copy

Thanks

Any questions

Call Sam

305-479-9857

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Apex PS. 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:

Sam Soriero

Name of Person

Apex PS LLC

Firm/Company

11 Island Ave #1108

Address

Miami Beach, FL 33139

City/State and Zip Code

ss@rmafla.com

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

For further information concerning this matter, please call:

Samuel Soriero

Name of Person

305
at (_____) _____

Area Code

479-9857

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

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: Apex PS, LLC

SECOND: The Florida Document Number of the limited liability company is: L10000029737

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

11 Island Ave #1108

Miami Beach, FL 33139

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

11 Island Ave #1108

Miami Beach, FL 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.

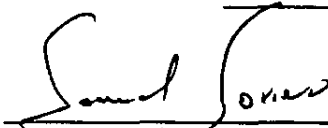
a. Granted to: Samuel Soriero and David Halabu

b. No authority granted to: N/A

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

a. Granted to: Samuel Soriero and David Halabu

b. No authority granted to: N/A


Signature of authorized representative

Sam Soriero
Typed or printed name of signature

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

RECEIVED
15 FEB 10 AM 8:59
TALLAHASSEE, FLORIDA