

L14 000013024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

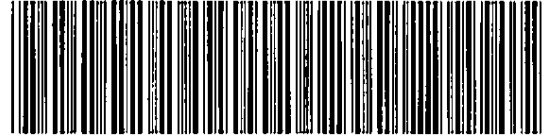
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2020 JAN 24 AM 7:11

FILED

FEB 20 2020
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PASCAL 2014 LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

CANTOS ROBERT

Name of Person

Firm/Company

19821 NW 2ND AVE SUITE 385

Address

MIAMI GARDENS, FL 33169

City/State and Zip Code

FFMSERVICESLLC@GMAIL.COM

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

For further information concerning this matter, please call:

CANTOS, ROBERT

954

2137259

at (

Area Code

) Daytime Telephone Number

Name of Person

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

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: PASCAL 2014 LLC

SECOND: The Florida Document Number of the limited liability company is: L14000013024

THIRD: The street address of the limited liability company's principal office is:
19821 NW 2ND AVE SUITE 385
MIAMI GARDENS FL 33169

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


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: CANTOS, ROBERT
 - b. No authority granted to: CANTOS, PASCAL, CANTOS, SOLANGE
- 2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
 - a. Granted to: CANTOS, ROBERT
 - b. No authority granted to: CANTOS, PASCAL, CANTOS, SOLANGE

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2020 JAN 24 AM 7:11

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Signature of authorized representative

CANTOS ROBERT

Typed or printed name of signature

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

Continuance of page 2



Signature of authorized representative

CANTOS PASCIL

Typed or printed name of signature



Signature of authorized representative

CANTOS Solange

Typed or printed name of signature

Signature of authorized representative

Typed or printed name of signature

Signature of authorized representative

Typed or printed name of signature