

U400086639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

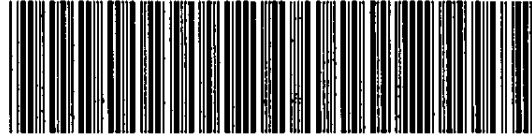
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 08 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ST. GEORGE AND ST. KARA'S ENTERPRISES 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:

BEEJAL P. THAKORE, ESQ.

Name of Person

DAVIS BASTA LAW FIRM, P.A.

Firm/Company

31111 U.S. 19 NORTH

Address

PALM HARBOR, FL 34684

City/State and Zip Code

E-service@davisbastalaw.com

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

For further information concerning this matter, please call:

BEEJAL P. THAKORE, ESQ.

at (

727

938-2255

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

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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: ST. GEORGE AND ST. KARA'S
ENTERPRISES LLC

SECOND: The Florida Document Number of the limited liability company is: L14000086639

THIRD: The street address of the limited liability company's principal office is:
5545 ULMERTON RD
CLEARWATER, FLORIDA 33760

The mailing address of the limited liability company's principal office is:
5545 ULMERTON RD
CLEARWATER, FLORIDA 33760

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.

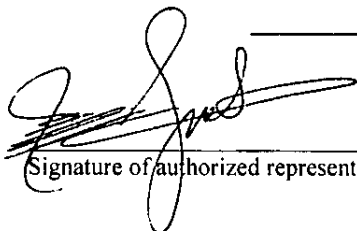
a. Granted to: _____

b. No authority granted to: HOSNI S. GHALI, SR.

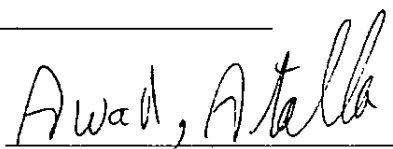
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: ATALLA AWAD, AS MANAGER, REQUIRES
A 75% VOTE OF MEMBERS FOR ANY ACTION.

b. No authority granted to: HOSNI S. GHALI, SR.



Signature of authorized representative



Typed or printed name of signature

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

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