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SECRETARY OF STATE
AND AHASSEE, FLORIDA

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EDWARD S. ROBBINS, P.A.

ATTORNEY AT LAW 800 S.E. THIRD AVENUE SUITE 300 FORT LAUDERDALE, FL 33316

ADMITTED
NEW YORK AND FLORIDA

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May 18, 2016

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: IAM430J, LLC

Dear Sir/Madam:

Enclosed is a Statement of Authority to be filed with the State for the referenced Florida limited liability company, together with our firm's check in the sum of \$25.00 representing the total filing fee.

Please return the original filed document in the stamped addressed envelope provided for your convenience and feel free to contact us with any questions you may have.

Very truly yours,

Edward S. Robbins,

By:_

Madalyn Rosen

Legal Assistant

Encl.

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	
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:	
Isaac Beraja, Moris Moreno & Alfredo Gugig	
Name of Person	
IAM430J, LLC	•
Firm/Company	
430J Ansin Boulevard	TALLI
Address	全部美工
Hallandale Beach, FL 33009-6341	ASSE 23
City/State and Zip Code	
Isaac@bullseyeprotection.com	8: 28 TATE URIDA
E-mail address: (to be used for future annual report notification)	⇒ co
For further information concerning this matter, please call:	
Isaac Beraja 305 424-4788	
Name of Person Area Code Daytime Teleph	ione 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 authority:	g statemen	tof	
FIRST: The name of the limited liability company is: IAM430J, LLC			
a Florida limited liability company			
SECOND: The Florida Document Number of the limited liability company is: L16000009338			
THIRD: The street address of the limited liability company's principal office is: 430J Ansin Boulevard			•
Hallandale Beach, FL			
33009-6341			
The mailing address of the limited liability company's principal office is: 430J Ansin Boulevard			
Hallandate Beach, FL			
33009-6341			
FOURTH: This statement of authority grants or sets limitations of authority on all persons having the position of a person in a company, whether as a member, transferee, manager, officer or otherwise or person on the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: Isaac Beraja, Moris Moreno and			
Alfredo Gugig	·		
b. No authority granted to:	SECRETARY ALLAHASSI	6 'MAY 23	FIL
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company			ILED
a. Granted to: Isaac Beraja, Moris Moreno and	NOSTA VALS	φ	
Alfredo Gugig	DA PA	28	
b. No authority granted to:			
Signature of authorized representative Typed or printed name of si Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	s / hava gnature	10, A	ifredu Ong i g
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