

L16 0000 79099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

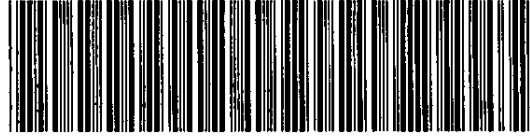
(Business Entity Name)

(Document Number)

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2016 JUN 20 P 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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JUN 21 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Trap God Bail Bonds

\_\_\_\_\_  
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:

Jonathan Crespo

\_\_\_\_\_  
Name of Person

Trap God Bail Bonds

\_\_\_\_\_  
Firm/Company

5715 Northwest 2nd Avenue

\_\_\_\_\_  
Address

Miami, Florida 33127

\_\_\_\_\_  
City/State and Zip Code

TrapGodBailBonds@Gmail.com

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

For further information concerning this matter, please call:

Jonathan Crespo

\_\_\_\_\_  
Name of Person

305  
at ( )

Area Code

244-7388

\_\_\_\_\_  
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: Trap God Bail Bonds

**SECOND:** The Florida Document Number of the limited liability company is: L16000079099

**THIRD:** The street address of the limited liability company's principal office is:  
5715 Northwest 2nd Avenue  
Miami, Florida 33127 #806

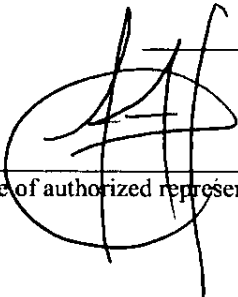
The mailing address of the limited liability company's principal office is:  
5715 Northwest 2nd Avenue  
Miami, Florida 33127 #806

**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: Owner: Jonathan Crespo
  - b. No authority granted to: \_\_\_\_\_
- 2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
  - a. Granted to: Owner: Jonathan Crespo
  - b. No authority granted to: \_\_\_\_\_

2013 JUN 20 P 12: 54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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Signature of authorized representative

Jonathan Crespo  
Typed or printed name of signature

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