

L19000237964

Florida Department of State
Division of Corporations
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Division of Corporations
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TALLAHASSEE, FLORIDA

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FALCONCREST LIMITED LLC**

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S. PRATHER

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TALLAHASSEE, FLORIDA

H21000388772

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FALCONREST LIMITED 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:

RONALD GOLDBERG

Name of Person

FALCONREST LIMITED LLC

Firm/Company

8317 LAUREL LAKE WAY

Address

NAAPLES, FL 34119

City/State and Zip Code

ALLIANCECAPITALCORP@gmail.com

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

For further information concerning this matter, please call:

RONALD GOLDBERG

Name of Person

at (646)

Area Code

468-6300

Daytime Telephone Number

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)

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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: FALCONCREST LIMITED LLC

SECOND: The Florida Document Number of the limited liability company is: L19000237964

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

8317 LAUREL LAKE WAY

NAPLES, FL 34119

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

8317 LAUREL LAKE WAY

NAPLES, FL 34119

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.

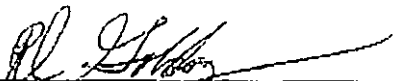
a. Granted to: _____

b. No authority granted to: _____

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

a. Granted to: ALLAN MIGDALL

b. No authority granted to: _____


Signature of authorized representative

RONALD GOLDBERG
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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