110000183308

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	(Oily-Oille-Zight Hollow)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

QUIET RIVER INVE	ST LLC			
	"			
				
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
		ļ		RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			· ·	Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
			. — —	Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
				Vehicle Search
				Driving Record
Requested by: SETH	03/28/22			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
Hallo				UCC 11 Retrieval
Walk-In	Will Pick Up			Courier





FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2022

CAPITAL CONNECTION, INC.

SUBJECT: QUIET RIVER INVESTILLC

Ref. Number: L16000183308

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 522A00007293

Irene Albritton Regulatory Specialist III

www.sunbiz.org

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT:	QUIET RIVER INVEST LLC		
SOBJECT.		nited Liability Co	пралу
Dear Sir or N	Madam:		
The enclosed	d Statement of Authority and fec(s) are s	ubmitted for filing	g.
Please return	all correspondence concerning this mat	ter to the followin	ng:
Natalia Med	deiros		
	Name of Person		_
CSG - Capit	tal Services Group Inc		
	Firm/Company		_
1191 E Nev	wport Center Dr. #103		
	Address		_
Coconut C	reck, FL 33442		
	City/State and Zip Code	• 🛶	_
	newaygroup.biz		
Е	-mail address: (to be used for future annua	al report notification	on)
For further	information concerning this matter, pleas	e call:	
Natalia Mo	edeiros	954 at (427-4770
	Name of Person	Area Code	Daytime Telephone Number
	Aailing Address:		Street Address:
	legistration Section		Registration Section
	Division of Corporations		Division of Corporations
P	.O. Box 6327		The Centre of Tallahassee

CR2E138 (2/14)

Tallahassee, FL 32314

8

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

STATEMENT OF AUTHORITY

Pursuant authority		5.0302(1), Florida Statutes	s, this limited liability co	mpany submits the followin	g statement of
FIRST:	The name of	the limited liability compa	any is: QUIET RIVER (NVEST LLC	
SECONI	D: The Floric	da Document Number of t	he limited liability comp	any is:	
		ddress of the limited liabil RIVER DR E #1950 - F			2022 HAR 30
-	_	g address of the limited lia RIVER DR E #1950 - F			30 ATTACHER
				nority on all persons having	
person	on the follow 1. May ex	cecute an instrument transf	EZENDE TO SELL & B	in the name of the company. UY PROPERTIES	
	b.	No authority granted to:	MARCOS REZENDE 1	O SELL THE	
	2. May e	Granted to:		se act for or bind, the compa	any.
	b.	No authority granted to:	MARCOS REZENDE	TO SELL THE	
X		M		SIDNEY MILLER	-
Şigmini	re of authoriz	ed representative		Typed or printed name of	f signature