

LO4000052878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

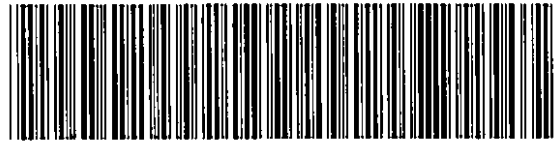
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800317411948

08/30/18--01007--019 **25.00

2018 AUG 30 PM 3: 51
SECRETARY OF STATE
CALLAHAN/SECRET LONDON

FILED

RUCE
SEP 07 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MANDIOLA HOLDINGS, 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:

MARIANELA UGARTE

Name of Person

Firm/Company

100 ANDALUSIA AVE, APT 603

Address

MIAMI, FLORIDA 33134

City/State and Zip Code

MARIANELA@UGARTEREALTY.COM

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

For further information concerning this matter, please call:

MARIANELA UGARTE

Name of Person

305

Area Code

338-9308

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 AUG 30 PM 3:51

FILED

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: MANDIOLA HOLDINGS, LLC

SECOND: The Florida Document Number of the limited liability company is: L04000052878

THIRD: The street address of the limited liability company's principal office is:
100 ANDALUSIA AVE
UNIT 603
CORAL GABLES, FLORIDA 33134

The mailing address of the limited liability company's principal office is:
100 ANDALUSIA AVE
UNIT 603
CORAL GABLES, FLORIDA 33134

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: MARIANELA UGARTE

b. No authority granted to: _____

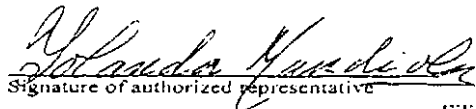
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: MARIANELA UGARTE

b. No authority granted to: _____

2018 AUG 30 PM 3: 51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED


Signature of authorized representative

YOLANDA MANDIOLA
Typed or printed name of signature

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