

L06000010739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

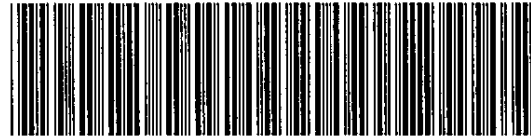
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. SCOTT

OCT 4 2017

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pembroke Realty, LLC, a Florida Limited Liability Company  
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:

Patty Crissy

Name of Person

Broward Title Company

Firm/Company

4700 Sheridan Street, Suite I

Address

HOLLYWOOD, FL 33021

City/State and Zip Code

hlgenlcont@aol.com

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

For further information concerning this matter, please call:

Christine Salas

Name of Person

at ( 718 )

Area Code

834-8675

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

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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: Pembroke Realty, LLC, a Florida Limited Liability Company

SECOND: The Florida Document Number of the limited liability company is: 20-4235964

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

197 Columbia Street

Brooklyn, New York 11231

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

197 Columbia Street

Brooklyn, New York 11231

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: Humberto Lopes

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: Humberto Lopes

b. No authority granted to: \_\_\_\_\_

[Signature]  
Signature of authorized representative

Humberto Lopes  
Typed or printed name of signature

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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