

L06000/10630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

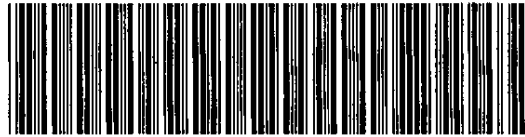
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 MAR 26 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 16 2015
T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Four Towers #7, 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:

Annabel Fernandez.

Name of Person

Express Title Services Group Inc.
Firm/Company

10261 SW 72 St. #101
Address

Miami FL 33173
City/State and Zip Code

afernandez@expresstitleservices.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Annabel Fernandez. at (352) 274-8200
Name of Person Area Code 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



March 23, 2015

Registration Section
Division of Corporation
2661 Executive Center Circle
Tallahassee, FL 32301

RE:
Property Address: Four Towers # 7 LLC
File No.: 15-10982

To Whom It May Concern:

Enclosed please find the following:

- Check number 25679 in the amount of \$55.00 (Filing fee & Certified Copy fee)
- Original Statement of Authority form Signed

If you have any questions, do not hesitate to contact our office.

Sincerely,

Becky Sanz
Post Closing Department

Cc/File
/encl.
/bs

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: Four Towers #7, LLC

SECOND: The Florida Document Number of the limited liability company is: LO6000110630

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

9450 Sunset Dr
Miami, FL 33173

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

Same

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.

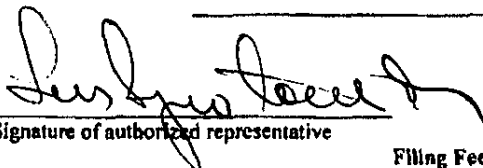
a. Granted to: Luis Sergio Torres

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: _____

b. No authority granted to: _____


Signature of authorized representative

Luis Sergio Torres
Typed or printed name of signature

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

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TALLAHASSEE, FLORIDA