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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 10 2015
J SHIVERS

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November 3, 2015

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Live Oak, LLC
Grape Leaf Park, LLC
Oak Leaf Park, LLC
Halaal, LLC

Dear Sir/Madam:

Enclosed are Statements of Authority to be filed with the State for the four (4) referenced Florida limited liability companies, together with our firm's check in the sum of \$100.00 representing the total filing fees.

Please return the original filed documents in the stamped addressed envelope provided for your convenience and feel free to contact us with any questions you may have.

Very truly yours,
Edward S. Robbins, P.A.

By: 

Madalyn Rosen
Legal Assistant

Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Halaal, 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:

Nabil Kishk

Name of Person

Halaal, LLC

Firm/Company

P.O. Box 6467

Address

Lake Worth, FL 33466

City/State and Zip Code

nabilkishk@aol.com

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

For further information concerning this matter, please call:

Nabil Kishk

at (954)

554-8525

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

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: Halaal, LLC

SECOND: The Florida Document Number of the limited liability company is: L07000120436

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

4791 Gulfstream Road

Lake Worth, FL 33461

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

PO Box 6467

Lake Worth, FL 33466

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.

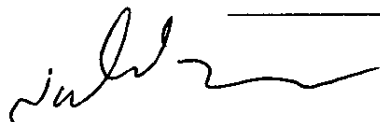
a. Granted to: Nabil Kishk

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: Nabil Kishk

b. No authority granted to: _____



Signature of authorized representative

NABIL KISHK

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA