## W8000 88752

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## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	PINEDAS PROPERTIES, LLC
SODJE	Name of Limited Liability Company
Dear Si	ir or Madam:
The end	closed Statement of Authority and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Maria	a Del Pilar Rubiano
-	Name of Person
	Firm/Company
1060	7 Dixon Drive
	Address
River	view, FL 33579
-	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	ther information concerning this matter, please call:
Ma	VIA Name of Person Area Code Daytime Telephone Number
•	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: PINEDAS PROPERTIES, LLC SECOND: The Florida Document Number of the limited liability company is: <u>L08000088752</u> THIRD: The street address of the limited liability company's principal office is: 7831 Causeway Blvd. Tampa, FL 33619 The mailing address of the limited liability company's principal office is: 7831 Causeway Blvd. Tampa, FL 33619 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: Maria Del Pilar Rubiano b. No authority granted to: 2. May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: Maria Del Pilar Rubiano No authority granted to: Luis A. Pineda Signature of Typed or printed name of signature ed representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)