

L09000005179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

JAN 03 2017

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EUROT 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:

Martin F. Klingenberg

Name of Person

Attorney

Firm/Company

1455 Blue Point Ave

Address

Naples, FL 34102

City/State and Zip Code

martin_20007@yahoo.com

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

For further information concerning this matter, please call:

Martin KLingenberg

239

404-3546

Name of Person

at ()

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida

MAILING ADDRESS:

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

MARTIN F. KLINGENBERG
ATTORNEY AT LAW
NAPLES, FL 34102
GENERAL ACCOUNT

554

63-466/631

CR2E138 (2/14)

PAY TO THE
ORDER OF

Florida Department of State
Twenty Five

12/29/16

\$25.00

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Security
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REGIONS BANK

FOR

Statement of Authority

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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: EUROT LLC

SECOND: The Florida Document Number of the limited liability company is: L09000005179

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

352 12TH AVENUE S

NAPLES, FL 34102

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

1455 BLUE POINT AVENUE

NAPLES, FL 34102

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status 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: RENATA SABONGUI

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: RENATA SABONGUI

b. No authority granted to: _____


Signature of authorized representative

MARTIN F. KLINGENBERG
Typed or printed name of signature

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