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COVER LETTER

TO: Registration Second Division of Corp			•	
SUBJECT: KRU	nchie Enterp Name of Limite	RISCS LL d Liability Company	<u> </u>	
Dear Sir or Madam:				
The enclosed Statement o	f Authority and fee(s) are subr	nitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
1	Yancz - Calv			
Krunchie	Enterprises, Firm/Company	<u>LLC</u>		PS A
2840 W	· ORange A	lvenue		FURTHER - 5
Apopka City/St	FLORIda :	32703		78 G
	Cere-SRi. (to be used for future annual r			<u></u> " →
For further information co	oncerning this matter, please c	all:		
Melinda We	rder lein		649-6552 Daytime Telephone N	
CTD FT TOOL	NIED ADDDESS	BAAM TELO	DBDESS	

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

authority	
FIRST:	The name of the limited liability company is: KRUNChie Enterprises, LLC
SECON	D: The Florida Document Number of the limited liability company is: <u>L09000010019</u>
THIRD:	The street address of the limited liability company's principal office is: $2840 \text{(1)} 080000000000000000000000000000000000$
	2840 W. Orange Avenue. Apopka, Florida 32703
	The mailing address of the limited liability company's principal office is: 2840 W. Drange Avenue
	4popka, FL 32703
position	H: This statement of authority grants or sets limitations of authority on all persons having the status or of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific in the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: Tina M Janez - Calvo
	b. No authority granted to: Manuel A Yanez · Calvo
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the company. a. Granted to: Tiwa M Yanez-Calvo
	b. No authority granted to: Manuel A Hanez-Calvo
	Mulus Tina M. Vanez-Calvo Typed or printed name of signature
Signature	re of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)

ENTERTAINMENT RETAIL ENTERPRISES, LLC • OPERATING ACCOUNT

12300

Division of Corporations

Check Number: Check Date.

Check Amount:

12300 02/23/15 30.00

 INV #
 Date
 Gross Amount
 Discount Taken
 Amount Paid

 Krunchie L09000010019
 02/23/15
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