

L09 000014930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

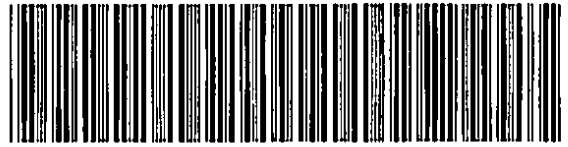
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TO: Registration Section
Division of Corporations

SUBJECT: INVERSIONES LA ASUNCION 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:

Jose J. Leonardo

Name of Person

Law Offices of Jose J. Leonardo, Esq.

Firm/Company

500 S. Dixie Highway, Suite 204

Address

Coral Gables, FL 33146

City/State and Zip Code

jose.leonardo@jleonardolaw.com

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

For further information concerning this matter, please call:

Jose Leonardo

305

275-9177

at

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Inversiones La Asuncion LLC

SECOND: The Florida Document Number of the limited liability company is: L09000014930

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

9300 S. Dadeland Blvd., Suite 600

Miami, FL 33156

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

9300 S. Dadeland Blvd., Suite 600

Miami, FL 33156

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: Carlos Rodriguez Freitas

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: Carlos Rodriguez Freitas

b. No authority granted to: _____

Signature of authorized representative

Carlos Rodriguez Freitas, Manager

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**