# 110000000 2421

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
| ,                                       |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
| Sertimotics of Claus                    |
|   |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |

Office Use Only



000352856670

10/06/20--01016--029 \*\*30.00

2020 OCT -6 AM 6: 36

NOV 13 2020 S. YOUNG

### COVER LETTER

|               | gistration Section vision of Corporations |                          |                          |
|---------------|---|--------------------------|--------------------------|
| Di            | Henao Inversion & Services LLC            |                          |                          |
| SUBJECT:      |   |                          |                          |
|               | Name of I                                 | Limited Liability Com    | pany                     |
| Dear Sir or   | Madam:                                    |                          |                          |
| The enclose   | d Statement of Authority and fec(s) ar    | e submitted for filing.  |                          |
| Please retur  | n all correspondence concerning this n    | natter to the following  | :                        |
| Bridgette A   | lvarez, Esq.                              |                          |                          |
|               | Name of Person                            |                          |                          |
| Miami Lega    | al, P.A.                                  |                          |                          |
|               | Firm/Company                              |                          |                          |
| 300 South A   | Aragon Avenue, Suite 310                  |                          |                          |
|               | Address                                   |                          |                          |
| Coral Gable   | s, FL 33134                               |                          |                          |
|               | City/State and Zip Code                   |                          |                          |
| E-ı           | nail address: (to be used for future ann  | nual report notification | <del>)</del>             |
| For further i | nformation concerning this matter, ple    | ase call:                |                          |
| Bridgette A   | varez                                     | 305                      | 668-6449                 |
|               | 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

| uthority:                |   |                                      |
|--------------------------|---|--------------------------------------|
| FIRST: 1                 | The name of the limited liability company is:  Henao Inversion & Services LLC   |                                      |
| SECOND                   | : The Florida Document Number of the limited liability company is:  | -                                    |
| THIRD;                   | The street address of the limited liability company's principal office is:  |                                      |
| <u> </u>                 | North Bay Village, FL 33141   | <del></del>                          |
| 7                        | The mailing address of the limited liability company's principal office is:   | 2020 O                               |
|                          | North Bay Village, FL 33141   | 2020 0C1 -6                          |
| –<br>OURTH<br>Osition of | I: This statement of authority grants or sets limitations of authority on all persons having a person in a company, whether as a member, transferee, manager, officer or otherwise.   | ng the status or                     |
| erson on                 |   | ng the status or e or to a specific  |
| sition of<br>erson on    | I: This statement of authority grants or sets limitations of authority on all persons having a person in a company, whether as a member, transferee, manager, officer or otherwise the following:  May execute an instrument transferring real property held in the name of the compa   | ng the status or e or to a specific  |
| osition of<br>erson on t | b. No authority granted to:  This statement of authority grants or sets limitations of authority on all persons having a person in a company, whether as a member, transferee, manager, officer or otherwise the following:  May execute an instrument transferring real property held in the name of the compant.  Granted to:  Dulce Noguera  b. No authority granted to: | ng the status or ce or to a specific |
| osition of<br>erson on i | b. No authority granted to:  May enter into other transactions on behalf of, or otherwise act for or bind, the com  a. Granted to:  May enter into other transactions on behalf of, or otherwise act for or bind, the com  a. Granted to:  b. No authority granted to:  b. No authority granted to:   | ng the status or ce or to a specific |
| osition of<br>erson on t | the following:  May execute an instrument transferring real property held in the name of the compa  a. Granted to:  Dulce Noguera  b. No authority granted to:  May enter into other transactions on behalf of, or otherwise act for or bind, the com  a. Granted to:   | e or to a specific                   |

CR2E138 (2/14)