

L10 000011218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

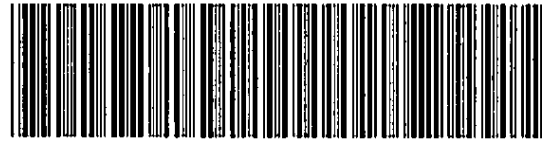
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
2021 FEB 23 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FL

2/12/21

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BLUE ALEON 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:

Massimo Reboa

\_\_\_\_\_  
Name of Person

Reboa Law Firm

\_\_\_\_\_  
Firm/Company

12 SE 7th Street, Ste 704

\_\_\_\_\_  
Address

Fort Lauderdale, FL 33301

\_\_\_\_\_  
City/State and Zip Code

massimo@reboa.law

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

For further information concerning this matter, please call:

Massimo Reboa

954  
at ( )

530-9781

\_\_\_\_\_  
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

FILED

**STATEMENT OF AUTHORITY**

2021 FEB 23 AM 9:21

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

SECRETARY OF STATE  
TALLAHASSEE, FL

**FIRST:** The name of the limited liability company is: BLUE ALCON LLC

**SECOND:** The Florida Document Number of the limited liability company is: 110000011218

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

4700 9th ave n

St. Petersburg, FL 33713

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

4700 9th ave n

St. Petersburg, FL 33713

**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.

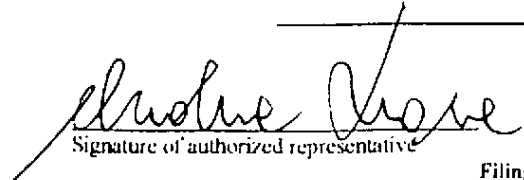
a. Granted to: Teresa Martin the power to execute all the documents necessary  
to transfer the properties at 708 Hampton Ave NE, Aiken, SC 29801 and  
at 4303 E Osborne Ave, Tampa, FL 33160

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: \_\_\_\_\_

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

Andrea Leone

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)