

L10000027229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

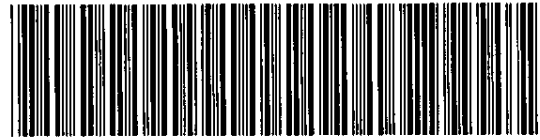
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 FEB -2 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
RECEIVED
15 FEB -2 PM 1:50

ACCOUNT NO. : I20000000195

REFERENCE : 486266 7524252

AUTHORIZATION : *Lydia Cohen*

COST LIMIT : \$ 25.00

ORDER DATE : February 2, 2015

ORDER TIME : 1:34 PM

ORDER NO. : 486266-010

CUSTOMER NO: 7524252

FOREIGN FILINGS

NAME: DEVCO PROPERTIES, LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62935

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DEVCO PROPERTIES, 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:

JENNIFER LEVIN, ESQ.

Name of Person

JENNIFER LEVIN, P.A.

Firm/Company

19380 COLLINS AVE., #1120

Address

SUNNY ISLES BEACH FL 33160

City/State and Zip Code

jenniferlevinesq@outlook.com

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

For further information concerning this matter, please call:

JENNIFER LEVIN

Name of Person

at (305) 785-4323

Area Code

Daytime Telephone Number

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

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: DEVCO PROPERTIES, LLC

SECOND: The Florida Document Number of the limited liability company is: L10000027229

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

727 NE 3RD AVENUE SUITE 101

FORT LAUDERDALE, FL 33304

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

727 NE 3RD AVENUE SUITE 101

FORT LAUDERDALE, FL 33304

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: DOUGLAS J. STERNER

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

SEE ATTACHED

Typed or printed name of signature

Filing Fee: \$25.00

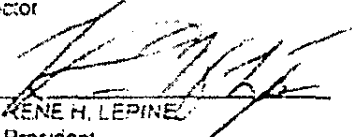
Certified Copy: \$30.00 (optional)

DEVCO PROPERTIES, LLC, a Florida limited liability company

By: DEVCO SOUTH, L.L.C., a Florida limited liability company, Managing Member

By: GLI FLORIDA CORP., a Florida corporation, Manager

By: GLI INTERNATIONAL, INC., a Corporation organized and existing under the laws of Quebec, Canada, Director

By: 
RENE H. LEPINE
President

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TALLAHASSEE, FLORIDA