

L10000088415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

JUN 27

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROVETTA 1947 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:

Hilda G. Flores a/k/a Hilda G. Flores De Visinoni

Name of Person

ROVETTA 1947 LLC

Firm/Company

10600 NW 14th Street, # 107

Address

Plantation, FL 33322

City/State and Zip Code

floresvisi74@hotmail.com

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

For further information concerning this matter, please call:

Hilda G. Flores

at (954)

348-1427

Name of Person

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: ROVETTA 1947 LLC

SECOND: The Florida Document Number of the limited liability company is: L10000088415

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

10600 NW 14th Street, # 107

Plantation, FL 33322

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

10600 NW 14th Street, # 107

Plantation, FL 33322

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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: Andrea Visinoni, Ana Maria Davidov and

Hilda G. Flores a/k/a Hilda G. Flores De Visinoni

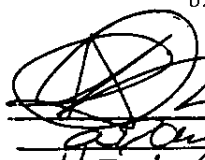
b. No authority granted to: ----

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Andrea Visinoni, Ana Maria Davidov and

Hilda G. Flores a/k/a Hilda G. Flores De Visinoni

b. No authority granted to: ----


Hilda G. Flores
Signature of authorized representative

ANDREA VISINONI
ANA MARIA DAVIDOV
HILDA G. FLORES
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)