

L10000089503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

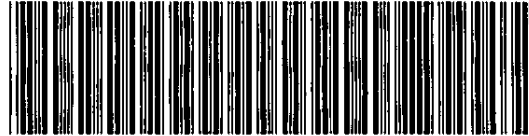
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AUG 01 2016

S. YOUNG

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TALLAHASSEE, FLORIDA
16 JUL 29 PM 2:05

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Oslu Investments 116
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:

Gonzalo Perez Jr., Esq.
Name of Person

Gonzalo Perez Jr. P.A.
Firm/Company

7915 Coral Way
Address

Miami, FL 33155
City/State and Zip Code

cospina@gperezlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gonzalo Perez Jr. at (305) 265-8228
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

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THIS DOCUMENT MAY AFFECT YOUR LEGAL RIGHTS. LEGAL ADVICE SHOULD BE
OBTAINED IN THE DRAFTING OF ANY LEGAL DOCUMENT.

STATEMENT OF AUTHORITY
(§38-30-172, C.R.S.)

1. This Statement of Authority relates to an entity¹ named Osi Investments 116, LLC
2. The type of entity is a:
- | | |
|---|---|
| <input type="checkbox"/> corporation | <input type="checkbox"/> registered limited liability partnership |
| <input type="checkbox"/> nonprofit corporation | <input type="checkbox"/> registered limited liability limited partnership |
| <input checked="" type="checkbox"/> limited liability company | <input type="checkbox"/> limited partnership association |
| <input type="checkbox"/> general partnership | <input type="checkbox"/> government or governmental subdivision or agency |
| <input type="checkbox"/> limited partnership | <input type="checkbox"/> trust |
| <input type="checkbox"/> | |
3. The entity is formed under the laws of Florida
4. The mailing address for the entity is 10171 NW 58 Street, Unit 9, Doral, FL 33178
5. The ☒ name ☒ position of each person authorized to execute instruments conveying, encumbering or otherwise affecting title to real property on behalf of the entity is Oswaldo R. Pinero
11449 NW 34 Street, Doral, FL 33178
6. The authority of the foregoing person(s) to bind the entity: ☒ is not limited ☐ is limited as follows:
7. Other matters concerning the manner in which the entity deals with interests in real property:
8. This Statement of Authority is executed on behalf of the entity pursuant to the provisions of §38-30-172, C.R.S.³
9. The Statement of Authority amends and supercedes in all respects any and all prior dated Statements of Authority executed on behalf of the entity.

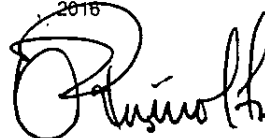
Executed this

18

day of

July

2018



Oswaldo R. Pinero

16 JUL 29 PM 2:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

¹ This form should not be used unless the entity is capable of holding title to real property.
² The absence of any limitation shall be prima facie evidence that no such limitation exists.
³ The statement of authority must be recorded to obtain the benefits of the statute.

State of Florida)
) ss
County of Miami-Dade)

The foregoing Statement of Authority was acknowledged before me this 18th day of July, 2016 by _____

Witness my hand and official seal.

My commission expires: _____



Carolina Ospina
Commission # GG000538
Expires: Nov. 22, 2018
Bonded thru Aaron Notary

Notary Public

WHEN RECORDED RETURN TO:

Gonzalo Perez, Jr., P.A.
7915 Coral Way, Miami, FL 33155

FILED
SECRETARY OF STATE
TALLAHASSEE, FL 32305
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