

L10 000 106499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

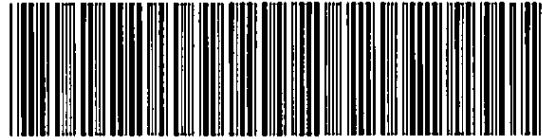
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500357451375

02/08/21--01010--010 **25.00

MAR 24 2021
S. YOUNG

2021 FEB -8 PM 6:23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EDK INVESTMENTS 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:

KIMBERLEE J. DE BIASE, ESQ.
Name of Person

BREGIER I DE BIASE
Firm/Company

20801 BISCAYNE BLVD., SUITE 300
Address

AVENTURA, FL 33180
City/State and Zip Code

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

For further information concerning this matter, please call:

KIMBERLEE J. DE BIASE 305 945-7527
Name of Person at () 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

Pursuant to section 605.0362(1), Florida Statutes, this limited liability company submits the following statement of authority.

FIRST: The name of the limited liability company is: EDK INVESTMENTS LLC

SECOND: The Florida Document Number of the limited liability company is: L10000106499

THIRD: The street address of the limited liability company's principal office is:
14350 NW 56 Court
Unit 115
Opa Locka, FL 33054

The mailing address of the limited liability company's principal office is:
14350 NW 56 Court
Unit 115
Opa Locka, FL 33054

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: ALEJANDRO D. KACHEROFF

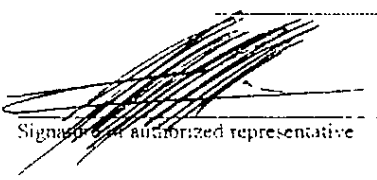
b. No authority granted to: _____

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

a. Granted to: ALEJANDRO KACHEROFF

b. No authority granted to: _____

2021 FEB -8 PM 6:23



Signed by authorized representative

Alejandro Kacheroff

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)