## (M)

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
RYAN LANDMARK, LLC SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Statement of Authority and fee(s) are	submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Harvey Trautenberg	
Name of Person	
Firm/Company	
4500 N State Road 7Suite 100	
Address	
Lauderdale Lakes, FL 33319	
City/State and Zip Code	
htrautenberg@YMPRealEstate.com	
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter, plea	se call:
Harvey Trautenberg	305 987-5418 at ()
Name of Person	Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations
Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	2 113 11. Montoe Street, Butte 610

Tallahassee, FL 32303

## STATEMENT OF AUTHORITY

TRST: The name of the limited liability company is:    RYAN LANDMARK, LLC				
ECOND: The Flo	rida Document Number o	f the limited liability	company is:	16
HIRD: The street	address of the limited liab			
Lauderdale	Lakes, FL 33319			<u> </u>
	ng address of the limited l	iability company's p	rincipal office is:	
Lauderdale	Lakes, FL 33319			<del></del>
sition of a person rson on the follow	tement of authority grants in a company, whether as a ing:  ecute an instrument transf  Granted to:  Harvey Trau	a member, transferee Ferring real property l	e, manager, officer or other	rwise or to a specifi
Ъ.	No authority granted to: Incur obligations in exce			
2. May e.	nter into other transactions  Granted to:  Harvey Transactions	on behalf of, or othe autenberg- Subject to	erwise act for or bind, the	company
b.	No authority granted to: Incur obligations in exce			
201	1		Moshe Popack, Mana	aging Member
gradure of authoriz		ling Fee: \$25.0 ertified Copy: \$30.0		ime of signature