L11000106094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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FEB 24 2015
T. HAMPTON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Consulting Vasquez LLC

Signature

Requested by: SETH

Name

02/20/15

Date

Time

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_____ Art of Inc. File_____

_____ LTD Partnership File_____

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_____ L.C. File_____

_____ Fictitious Name File_____

_____ Trade/Service Mark_____

_____ Merger File_____

_____ Art. of Amend. File_____

_____ RA Resignation_____

_____ Dissolution / Withdrawal_____

_____ Annual Report / Reinstatement_____

_____ Cert. Copy_____

_____ Photo Copy_____

_____ Certificate of Good Standing_____

_____ Certificate of Status_____

_____ Certificate of Fictitious Name_____

_____ Corp Record Search_____

_____ Officer Search_____

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_____ Fictitious Owner Search_____

_____ Vehicle Search_____

_____ Driving Record_____

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_____ UCC 11 Search_____

_____ UCC 11 Retrieval_____

_____ Courier_____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: consulting vasquez 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:

mirta Abreu
Name of Person

Diego L. Restrepo, P.A.
Firm/Company

2600 so. Douglas Road, Ste. 913
Address

Coral Gables, Florida 33134
City/State and Zip Code

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

For further information concerning this matter, please call:

Mirta Abreu at (786) 347-8560
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

CR2E138 (2/14)

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: consulting vasquez LLC, a Florida limited liability company

SECOND: The Florida Document Number of the limited liability company is: L11000106094

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

7270 NW 12 Street
PH 8
Miami, Florida 33126

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

2600 So. Douglas Road
Suite 913
Coral Gables, FL 33134

FOURTH: This statement of authority grants or sets limitations of authority to all persons having the authority of a position of a person in a company, whether as a member, transferee, manager, officer or otherwise or as a specific person or to the following:

1. May execute any instrument transferring real property held in the name of the company.

a. Granted to: Mirta Abreu as manager

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: Mirta Abreu as manager

b. No authority granted to:

Signature of authorized representative

Mirta Abreu as manager
Typed or printed name of signature

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

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