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1/29/2019 Division of Corporations
L 12000012076

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : GEOFFREY M. WAYNE, P.A.
Account Number : 076770003401
Phone : (305)381-8108
Fax Number : (305)381-8109

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mf@attorneymiami.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MIAMI VIEW PROPERTIES LLC**

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIAMI VIEW PROPERTIES 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:

Alexis I. Marrero Koratich, Esq.

Name of Person

Geoffrey M. Wayne, P.A.

Firm/Company

135 San Lorenzo Ave., PH 840

Address

Coral Gables, FL 33146

City/State and Zip Code

ME @attorneymiami.com

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

For further information concerning this matter, please call:

Alexis I. Marrero Koratich

Name of Person

at (305) 381-8108

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: MIAMI VIEW PROPERTIES LLC

SECOND: The Florida Document Number of the limited liability company is: L12000012076

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

4779 COLLINS AVE APT 2001

MIAMI BEACH, FL 33140

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

4779 COLLINS AVE APT 2001

MIAMI BEACH, FL 33140

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: JOSEPH F. BOULOS and HEBA DAYOUB

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: JOSEPH F. BOULOS and HEBA DAYOUB

b. No authority granted to: _____


Signature of authorized representative

HEBA DAYOUB, Sole Member
Typed or printed name of signature

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