

LP2000068221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

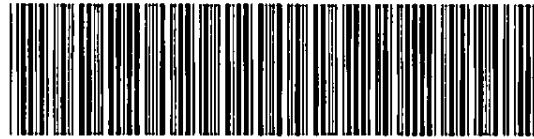
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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R. WHITE  
MAY 08 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** QUAI 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:

LARRY L. ADAIR, ESQ.

\_\_\_\_\_  
Name of Person

LARRY L. ADAIR, P. A.

\_\_\_\_\_  
Firm/Company

9715 WEST BROWARD BOULEVARD SUITE 303

\_\_\_\_\_  
Address

PLANTATION, FLORIDA 33324

\_\_\_\_\_  
City/State and Zip Code

[larry@lladairlaw.com](mailto:larry@lladairlaw.com)

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

For further information concerning this matter, please call:

LARRY L. ADAIR, ESQ.

954  
at ( )

600-3266

\_\_\_\_\_  
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

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: QUAI INVESTMENTS, LLC, a Florida limited liability company

**SECOND:** The Florida Document Number of the limited liability company is: L12000068221

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

9715 West Broward Boulevard

Suite Number 303

Plantation, Florida 33324

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

9715 West Broward Boulevard

Suite Number 303

Plantation, Florida 33324

**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.

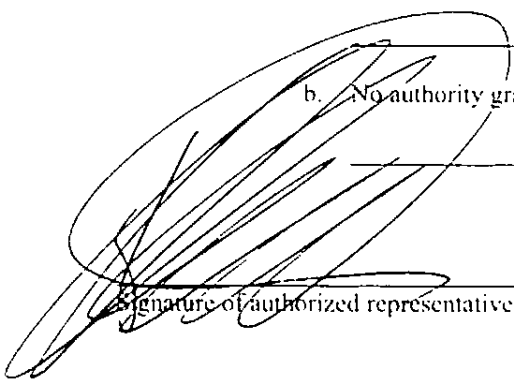
a. Granted to: SEMA CINGILLIOGLU

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: SEMA CINGILLIOGLU

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

LARRY L. ADAIR, MANAGER

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

2019 APR 26 PM 5:19