

L 12000093137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

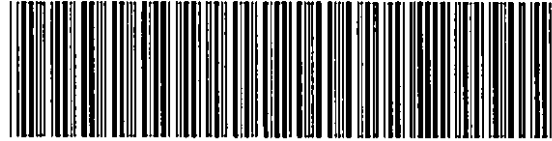
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U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

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U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA
TALLAHASSEE, FLORIDA

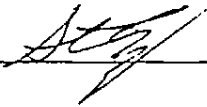
CAPITAL CONNECTION, INC.

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

CUTLER 21 LLC

Please Debit FCA000000003 For: 55

Thank you Seth Neeley



Art of Inc. File _____
LTD Partnership File _____
Foreign Corp. File _____
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 _____
Fictitious Search _____
Fictitious Owner Search _____
Vehicle Search _____
Driving Record _____
UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
Courier _____

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Signature

Requested by: seth

Name

Date

Time

Walk-In

Will Pick Up

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CUTLER 21 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:

N. BETTY GONZALEZ

Name of Person

LAW OFFICES OF N BETTY GONZALEZ PA

Firm/Company

2151 S LE JEUNE RD STE 204

Address

CORAL GABLES FL 33134

City/State and Zip Code

NBETTY@NBG-LAW.NET

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

For further information concerning this matter, please call:

N BETTY GONZALEZ

305

428-4800

at (_____) _____

Name of Person

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

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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: CUTLER 21 LLC

SECOND: The Florida Document Number of the limited liability company is: L12000093137

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

3401 SW 160 AVE., SUITE 330 MIRAMAR, FL 33027

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

3401 SW 160 AVE., SUITE 330 MIRAMAR, FL 33027

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: JUAN IGNACIO ACCAME

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: JUAN IGNACIO ACCAME

b. No authority granted to: _____

Juan Ignacio Accame

Signature of authorized representative

JUAN IGNACIO ACCAME

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

2023 JUL 13 AM 11:02

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