

L12000 160 222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

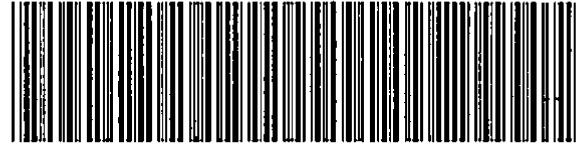
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 AUG 13 P 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 13 2019

T. LEMIEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BOND FIRST STEP GLOBAL ENTERPRISES, 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:

DORCAS TROCHE

Name of Person

RCG ACCOUNTING & ASSOCIATES INC.

Firm/Company

9000 SHERIDAN STREET SUITE 138

Address

PEMBROKE PINES, FL 33024

City/State and Zip Code

DORCAS@RCGACCOUNTANTS.COM

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

For further information concerning this matter, please call:

DORCAS TROCHE

Name of Person

954

Area Code

862-2222

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: BOND FIRST STEP GLOBAL ENTERPRISES, LLC

SECOND: The Florida Document Number of the limited liability company is: L12000160222

THIRD: The street address of the limited liability company's principal office is:
2625 EXECUTIVE PARK DRIVE
SUITE 5
WESTON, FL 33331

The mailing address of the limited liability company's principal office is:
2665 EXECUTIVE PARK DR
SUITE 5
WESTON, FL 33331

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: _____

b. No authority granted to: EDUARDO DE CASTRO

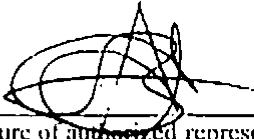
2. May enter into other transactions on behalf of, or otherwise act for or bind, _____ company.

a. Granted to: _____

b. No authority granted to: EDUARDO DE CASTRO

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



Signature of authorized representative

EDUARDO DE CASTRO

Typed or printed name of signature

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