

L13000033459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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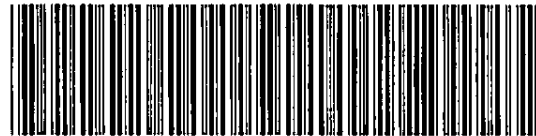
(Business Entity Name)

(Document Number)

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S. WARREN

AUG 25 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Duda SRQ 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:

Peter J. Pike, Esq.

Name of Person

Pike Law Firm, PA

Firm/Company

2716 Fruitville Road

Address

Sarasota, FL 34237

City/State and Zip Code

peter@pikerelaw.com

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

For further information concerning this matter, please call:

Peter J. Pike, Esq.

Name of Person

at (941)

Area Code

312-2580

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: Duda SRQ LLC

SECOND: The Florida Document Number of the limited liability company is: L13000033459

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

3647 Emily Lane

Sarasota, FL 34238

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

3647 Emily Lane

Sarasota, FL 34238

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: BAZ Management LLC, a Florida limited liability
company

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: BAZ Management LLC, a Florida limited liability
company

b. No authority granted to: _____

Signature of authorized representative

Yosi Hovav

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**