13000049401

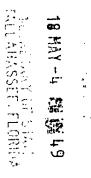
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
openial medianic to 1 m/g emission

Office Use Only



500312955175

05/04/18--01023--009 **25.00





COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: PASCAREM, LLC				
	nited Liability Co	mpan	y	
Dear Sir or Madam:				
The enclosed Statement of Authority and fee(s) are s	ubmitted for filin	ıg.		
Please return all correspondence concerning this mat	ter to the following	ng:		
Sarah Barbaccia				
Name of Person		_		
Sarah Barbaccia, P.A.				
Firm/Company				
942 SW 93 Terrace				
Address				
Plantation, FL 33324				
City/State and Zip Code				
sbarbaccia@barbaccialaw.com				
E-mail address: (to be used for future annua	ıl report notificati	ion)		
For further information concerning this matter, pleas	e call:			
Sarah Barbaccia	_ at (<u>954</u>	_)_	748-4890	
Name of Person	Area Code	е	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section	Registr	ration	ADDRESS: Section	
Division of Corporations Clifton Building	P.O. Bo	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallaha	assee,	Florida 32314	

E-RECORDED	simplifile
ID: 115053676	
County: Broward	
Date: 5-3-18	19 PM

STATEMENT OF AUTHORITY

stateme	t to section 605.0302(1), Florida Statutes, this limited liability company submits nt of authority: The name of the limited liability company is: PASCAREM LLC	Ū
SECON	ND: The Florida Document Number of the limited liability company is: <u>L13000</u>	049401
THIRD	The street address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE	
	FT. LAUDERDALE, FL 33311	
	The mailing address of the limited liability company's principal office is: 805 N. ANDREWS AVENUE	
	FT. LAUDERDALE, FL 33311	SE PLORIDA
status or	Th: This statement of authority grants or sets limitations of authority on all person position of a person in a company, whether as a member, transferee, manager, a pecific person on the following: 1. May execute an instrument transferring real property held in the name of the a. Granted to: Sarah Barbaccia, Esq.	officer or otherwise
	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: Sarah Barbaccia, Esq.

b. No authority granted to:
REMY POILEVEY
COUNTRY OF FRANCE
The foregoing instrument was sworn and subscribed before me this 2 wd day of 12 ch 2 c
Printed Notary Name

Filing Fee:

\$25.00

Certified Copy: \$30.00 (optional)



The foregoing instrument was sworn and subscribed before me this ______, 2018, by _______, who produced , who produced DRIVERS LICENSE as identification.

Notary Public, State of Michigan
County of Wayne
My Commission Expires Aug. 04, 2021
Acting in the County of ON LAND

Notary Public

LAWDENCE ZANE

Printed Notary Name

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)