

L1300005288C

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

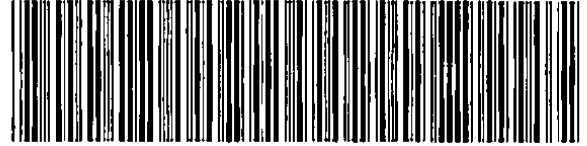
(Business Entity Name)

(Document Number)

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*Statement
of
Authority*

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DIVISION OF CORPORATIONS
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FEB 22 2019

D CUSHING

COVER LETTER

FD- Registration Section
Division of Corporations

SUBJECT: LEOPONGO, 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:

MARK S. MELAND

Name of Person

MELAND RUSSIN & BUDWICK, P.A.

Firm/Company

200 S. BISCAYNE BLVD., SUITE 3200

Address

MIAMI, FL 33131

City/State and Zip Code

CRAMOS@MELANDRUSSIN.COM

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

For further information concerning this matter, please call:

CARMEN RAMOS

Name of Person

305

Area Code

358-6363

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

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2019 FEB 22 PM 2:05

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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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: LEOPONGO, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000052880

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

200 S. BISCAYNE BLVD

SUITE 3200

MIAMI, FL 33131

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

200 S. BISCAYNE BLVD

SUITE 3200

MIAMI, FL 33131

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: Denise Amaral and/or Antonio C.

Rodrigues Do Amaral, each acting alone or jointly

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: Denise Amaral and/or Antonio C.

Rodrigues Do Amaral, each acting alone or jointly

b. No authority granted to: _____



Signature of authorized representative

DENISE AMARAL

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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DIVISION OF CORPORATIONS
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