

L30000086119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2014 MAY -1 P 06 23
05/01/14

B. BOSTICK

MAY - 7 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

ARM Z, LLC

SUBJECT: _____
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:

JAMES FRATANGELO

Name of Person

Firm/Company

1900 SUNSET HARBOUR DRIVE 2ND FL ANNEX

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

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

For further information concerning this matter, please call:

JAMES FRATANGELO

305

895-0891

at (_____) _____

Name of Person

Area Code

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: ARM Z LLC

SECOND: The Florida Document Number of the limited liability company is: L13000086115

THIRD: The street address of the limited liability company's principal office is:
1900 SUNSET HARBOUR DR. 2ND FL ANNEX

MIAMI BEACH, FL 33139

The mailing address of the limited liability company's principal office is:
1900 SUNSET HARBOUR DR. 2ND FL ANNEX

MIAMI BEACH, FL 33139

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.

JAMES FRATANGELO

a. Granted to: DANIEL COOSEMANS

b. No authority granted to: _____

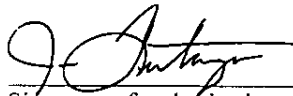
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

JAMES FRATANGELO

a. Granted to: DANIEL COOSEMANS

b. No authority granted to: _____

FIFTH: This document is to be effective as of January 1, 2014, all other agreements, powers of attorney or documents granting authority to ANY individual(s) are hereby revoked.



Signature of authorized representative

JAMES FRATANGELO, MGR

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)