

L13000094586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

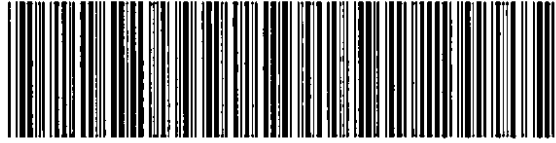
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AUG 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 710 NW 17 PB 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:

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 annual report notification)

For further information concerning this matter, please call:

Sarah Barbaccia

at (954) 748-4890

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: 710 NW 17 PB LLC

SECOND: The Florida Document Number of the limited liability company is: L13000094586

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

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: Sarah Barbaccia, Esq.

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: _____

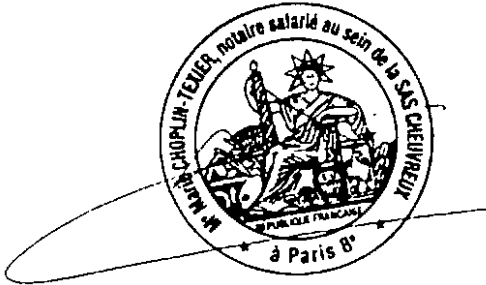
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SECRETARY OF STATE
FLORIDA

[Handwritten Signature]

PATRICK NOEL

The foregoing instrument was sworn and subscribed before me this 16 day of may, 2018, by PATRICK NOEL, who produced passport as identification.

SEAL:



[Handwritten Signature]
Notary Public

Marie CHOPLIN-TEXIER
Printed Notary Name

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

*un pour la certification
matérielle de la signature
de Monsieur Patrick NOEL
par Marie CHOPLIN-TEXIER
Notaire à PARIS le
16 mai 2018*

18 AUG 22 AM 7:10
CLERK OF THE COURT
TALLAHASSEE, FLORIDA

FILED