

LI3000097848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

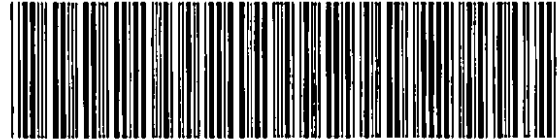
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GMPC 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
Name of Person at (954) 748-4890
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: GMPC LLC

SECOND: The Florida Document Number of the limited liability company is: L13000097848

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

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CLERK OF COUNTY COURT
DADE COUNTY, FLORIDA

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.

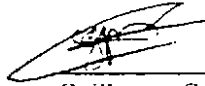
a. Granted to: Sarah Barbaccia, Esq.

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: _____



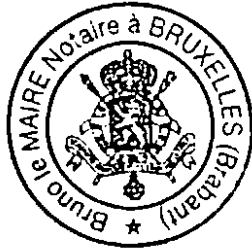
Guillaume Cousin

The foregoing instrument was sworn and subscribed before me this 22¹⁸ day of August, 2018, by COUSIN Guillaume Paul who produced 14 AP 98 7 22 as identification. Marie

SEAL:



Notary Public



le MAIRE

Printed Notary Name

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

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MILWAUKEE, WISCONSIN