

L130000105325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

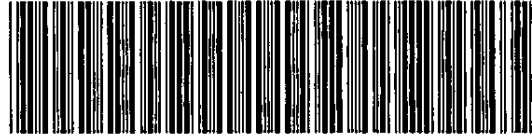
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200278666132

11/03/15--01025--028 **25.00

FILED
15 NOV -3 AM 11:33
RECEIVED
TALLAHASSEE, FLORIDA

NOV 05 2015

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Interninvest , 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:

Boris Topilyer

Name of Person

Interninvest, LLC

Firm/Company

12995 S Cleveland Ave Suite 248

Address

Fort Myers FL 33907

City/State and Zip Code

btopik@gmail.com

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

For further information concerning this matter, please call:

Boris Topilyer

Name of Person

at (239)

Area Code

603-4203

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: Interninvest, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000105325

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

13650 FIDDLESTICKS BLVD SUITE 202-181

FORT MYERS, FL 33912

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

13650 FIDDLESTICKS BLVD SUITE 202-181

FORT MYERS, FL 33912

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: Boris Topilyer

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: Boris Topilyer

b. No authority granted to: _____


Signature of authorized representative

Boris Topilyer
Typed or printed name of signature

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

FILED
15 NOV - 3 AM 11:33
CLERK OF STATE
TALLAHASSEE, FLORIDA