

L130001257191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

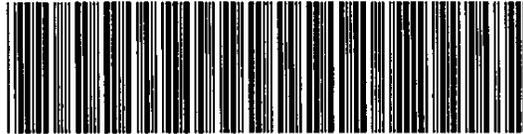
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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THE LAW OFFICES OF
LORENE SEELER YOUNG, P.A.

VIA FEDERAL EXPRESS

December 4, 2015.

Secretary of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: MULTICOW LLC
PROPERTY: 1190 NW 67 Street, Miami, Florida 33150
OUR FILE: 15005-62 / 15-0366

To whom it may concern:

Enclosed please find the Statement of Authority for Multicow, LLC to be filed with your office, along with the check of \$55.00. We are requesting a certified copy of the Statement of Authority.

It is extremely imperative that we get this back right away so that it does not delay the closing scheduled for next week. We have provided a return FedEx air bill and envelope to return the document back to our office.

Thank you and if you need anything further, please contact our office.

Very truly yours,

LORENE SEELER YOUNG, PA

By: Emily Cruz
Emily Cruz/Post Closing

/ec
Enclosures.
Statement of Authority

9124 Griffin Road, Cooper City, Florida 33328

Phone: (954) 585-3967

Facsimile: (954) 585-3987

Email: Emily@Lsy-Law.com

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MULTICOW, 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:

LORENE SEELER YOUNG

Name of Person

LORENE SEELER YOUNG PA

Firm/Company

9124 GRIFFIN ROAD

Address

COOPER CITY FL 33328

City/State and Zip Code

piooffers@piagroupusa.com

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

For further information concerning this matter, please call:

LORENE SEELER YOUNG

Name of Person

at (954)

Area Code

585-3967

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: MULTICOW, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000125719

THIRD: The street address of the limited liability company's principal office is:
20815 NE 16 AVENUE #B-15
MIAMI, FL 33179

The mailing address of the limited liability company's principal office is:
20815 NE 16 AVENUE #B-17
MIAMI, FL 33179

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: JIMMY LEVY, MANAGER

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: JIMMY LEVY, MANAGER

b. No authority granted to: _____

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RECORDS & CLERK
TALLAHASSEE, FLORIDA

PROPERTY REDEVELOPMENT & ACQUISITIONS LLC
A Florida Limited liability company

By: [Signature]
Signature of authorized representative

Jimmy Levy, Manager
Typed or printed name of signature

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