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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: The Jus Box 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:		
Name of Person  Co Weintraub? Weintraub P.A.  Firm/Company  2700 N. Military Trail, Suite 355  Address  Boca Raton Fl. 33431  City/State and Zip Code  Jo Murray 4/1 C g mail. Com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Jo Murray — ar — 305 525-4993  Refer Weintraub, Esq. at (561) 988-6411  Name of Person Area Code Daytime Telephone Number	2014 JAN 24 FM 3: 15	To your same of the same of th

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, Florida 32314

CR2E138 (12/13)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

## STATEMENT OF AUTHORITY

Pursuant to section 605.0302, Florida Statutes, this limited liability company submits the following statement of authority:	
FIRST: The name of the limited liability company is: The Jus Box, LLC.	_
SECOND: The street address of the limited liability company's principal office is:	_
The mailing address of the limited liability company's principal office is:  1700 Sw 3rd Avenue  Miami, FL 33129	
	2014, 15,41,24
b. No authority granted to: ANA MARIA AUAT	
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.  a. Granted to:	
b. No authority granted to: ANA MARIA AMAT	

Filing Fee:

\$25.00

Certified Copy: \$30.00 (optional)