

L13 000146433

Florida Department of State
Division of Corporations
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To:

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE GENTLEMEN'S BARBER, LLC**

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T. CLINE

OCT - 1 2018

EXAMINER

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE GENTLEMEN'S BARBER, 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:

MATTHEW S. BROWN

Name of Person

THE GENTLEMEN'S BARBER, LLC

Firm/Company

P. O. BOX 1097

Address

PALM CITY, FL 34991

City/State and Zip Code

CSORVILLO@MBROWN-LLC.COM

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

For further information concerning this matter, please call:

CORINNA SORVILLO

Name of Person

at (772)

Area Code

220-8600 EXT. 138

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

CR2E138 (2/14)

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2018 SEP 28 AM 9:12

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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: THE GENTLEMEN'S BARBER, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000146433

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

1952 SE FEDERAL HIGHWAY

STUART, FL 34994

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

P. O. BOX 1067

PALM CITY FL 34901

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.

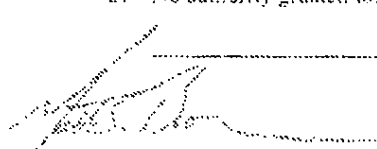
a. Granted to: _____

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: JORLEY JORGE CRUZ

b. No authority granted to: _____


Signature of authorized representative

MATTHEW S. BROWN

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)

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