

**L13000161628**

\_\_\_\_\_  
(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



**500293560735**

12/23/16--01017--018 \*\*55.00

**FILED**  
**16 DEC 23 PM 2:35**  
DIVISION OF COURT REPORTERS

**O SIMMONS**  
**DEC 27 2016**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RIAS1, 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:

Jose Armando R. Martinez

Name of Person

RIAS1, LLC

Firm/Company

9581 Sunrise Lakes Blvd., Unit 306

Address

Sunrise, FL 33322

City/State and Zip Code

mheroque@yahoo.com.ar

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

For further information concerning this matter, please call:

Jose Armando R. Martinez

Name of Person

at ( 954 )

Area Code

263-6732.

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: RIAS1, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L13000161628

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

9581 Sunrise Lakes Blvd., #306

Sunrise, FL 33322

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

same as above

**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.

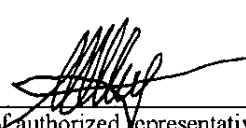
a. Granted to: Jose Armando R. Martinez  
Maria Hilda E. Roque

b. No authority granted to: n/a

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Jose Armando R. Martinez  
Maria Hilda E. Roque

b. No authority granted to: n/a

  
\_\_\_\_\_  
Signature of authorized representative

Jose Armando R. Martinez  
\_\_\_\_\_  
Typed or printed name of signature

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

**FILED**  
16 DEC 23 PM 2:35  
DIVISION OF REVENUE