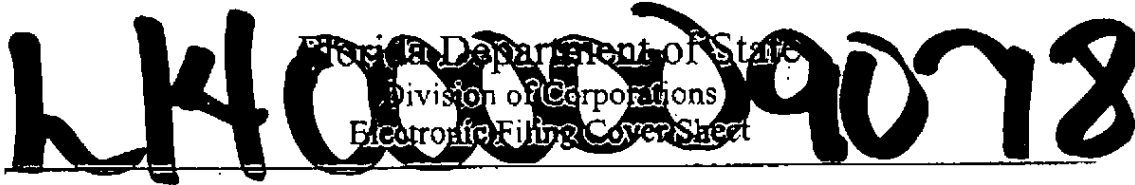


9/23/2019

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PAUL SALVER, P.A.
Account Number : I20020000087
Phone : (954)389-1333
Fax Number : (954)389-1397

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LAS HEY INVESTMENTS, LLC

Certificate of Status	0
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Page Count	03
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(((H19000284296 3)))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAS HEY INVESTMENTS, 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:

HEYDI RODRIGUEZ

Name of Person

Firm/Company

415 LAKEVIEW DR #101

Address

WESTON, FL 33326

City/State and Zip Code

vemexinc1@gmail.com

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

For further information concerning this matter, please call:

HEYDI RODRIGUEZ

Name of Person

at (754)

Area Code

2462095

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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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: LAS HEY INVESTMENTS LLC

SECOND: The Florida Document Number of the limited liability company is: L14000009078

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

416 LAKEVIEW DR

APT 105

WESTON, FL 33326

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

416 LAKEVIEW DR

APT 105

WESTON, FL 33326

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status of 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: RAFAEL RODRIGUEZ or HEYMAR RODRI
GUEZ or HEYDI RODRIGUEZ

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: RAFAEL RODRIGUEZ or HEYMAR RODRI
GUEZ or HEYDI RODRIGUEZ

b. No authority granted to: _____

Signature of authorized representative

[Handwritten Signature]
CR2E138 (2/14)

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

Typed or printed name of signature

Rafael H. Rodriguez
Heymar Rodriguez
Heydi Rodriguez

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