

L14 0000 33157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

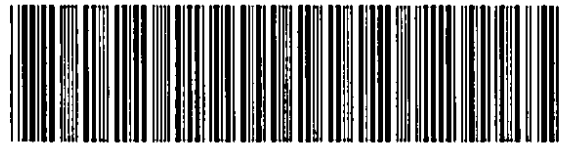
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUL 13 2020

20 JUL 13 4:11:18

LETTER
20 JUL 13 4:11:18

Statement
of
Authority

AUG 23 2020

D. C. L. L. L. L.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIS TWO 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:

Marci Lowman, Esq.

Name of Person

Lowman Law, P.A.

Firm/Company

8620 NE 2 Avenue

Address

Miami, Florida 33138

City/State and Zip Code

ML@LowmanTitle.com

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

For further information concerning this matter, please call:

Marci Lowman, Esq.

786

703-4162

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

20 JUL 19 3:11:19 PM
MARCI LOWMAN, ESQ.
LOWMAN LAW, P.A.
8620 NE 2 AVENUE
MIAMI, FL 33138

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: BIS TWO LLC

SECOND: The Florida Document Number of the limited liability company is: L14000033157

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

1154 JEFFERSON ST

HOLLYWOOD, FL 33019

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

1154 JEFFERSON ST

HOLLYWOOD, FL 33019

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.

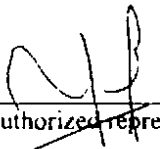
a. Granted to: MARCI LOWMAN

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: MARCI LOWMAN

b. No authority granted to: _____


Signature of authorized representative

Melina Alvarez, Manager

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**