

L14 0000 55707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

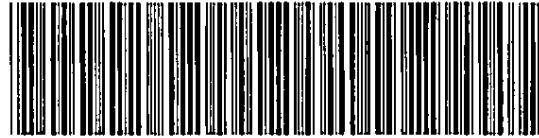
(Business Entity Name)

(Document Number)

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2020 APR 13 PM 1:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Y SULKER

APR 23 2020

1648

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hagstrom76, 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:

Sarah Barbaccia

Name of Person

Sarah Barbaccia, P.A.

Firm/Company

600 N. Pine Island Rd

Address

Plantation, FL 33324

City/State and Zip Code

sbarbaccia@barbaccialaw.com

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

For further information concerning this matter, please call:

Sarah Barbaccia

Name of Person

at (954) 748-4890

Area Code

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: Hagstrom76, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000055707

THIRD: The street address of the limited liability company's principal office is:
805 N. ANDREWS AVENUE

FT. LAUDERDALE, FL 33311

The mailing address of the limited liability company's principal office is:
805 N. ANDREWS AVENUE

FT. LAUDERDALE, FL 33311

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2020 APR 13 PM 1:30
CLERK OF DISTRICT COURT
NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

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: Sarah Barbaccia, Esq.

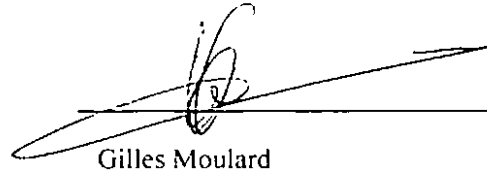
b. No authority granted to: _____

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

a. Granted to : Sarah Barbaccia, Esq.

b. No authority granted to: _____

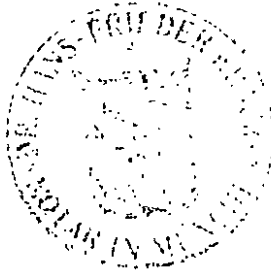
Signature of authorized representative


Gilles Moulard

Country of Germany

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or
☐ online notarizations, this 24 day of March, 2020 by Gilles MOULARD
who is personally known to me, or who produced the following identification: Passport
and who did take an oath.

(Seal)




(Signature of Notary)

(Printed Name of Notary)

Dr. Frank-Tobias Krauss
Notary
Bismarckstrasse 40
80333 München
Tel. 089 / 54 54 76-0
Mail: info@notarkrauss.de

Filing Fee: \$25.00

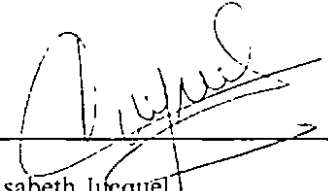
Certified Copy: \$30.00 (optional)

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

a. Granted to : Sarah Barbaccia, Esq.

b. No authority granted to: _____

Signature of authorized representative



Elisabeth Juquel

Country of Germany

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or
☐ online notarizations, this 24 day of March, 2020 by Elisabeth JUQUEL - MOULARD
who is personally known to me, or who produced the following identification: Passport
and who did take an oath.

(Seal)




(Signature of Notary)

(Printed Name of Notary)

Dr. Hans-Heinrich Beck KG
Notar
Brienner Str. 25
80333 München
Tel. 089 / 54 54 70-0
Mail: info@notarbeck.de

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)