

2140000 66194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

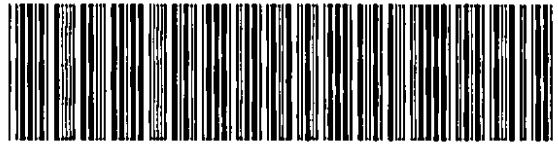
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/30/20--01044--017 **25.00

Statement
of
Authority

AUG 23 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GARLABAN 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:

Sarah Barbaccia

Name of Person

Sarah Barbaccia, P.A.

Firm/Company

600 N. Pine Island Road, Suite 175

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: GARLABAN INVESTMENTS, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000066194

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

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:

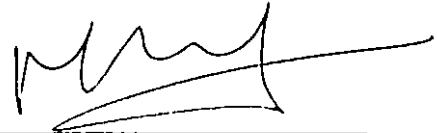
1. May execute an instrument transferring real property held in the name of the company.

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.

b. No authority granted to: _____



Signature of authorized representative

Muriele Rouyer

County of France

The foregoing instrument was sworn to and subscribed before me by means of ☒ physical presence or ☐ online notarization this 18 day of February, 2020, by Muriele Rouyer who ☐ is personally known or ☒ has produced France ID as identification.

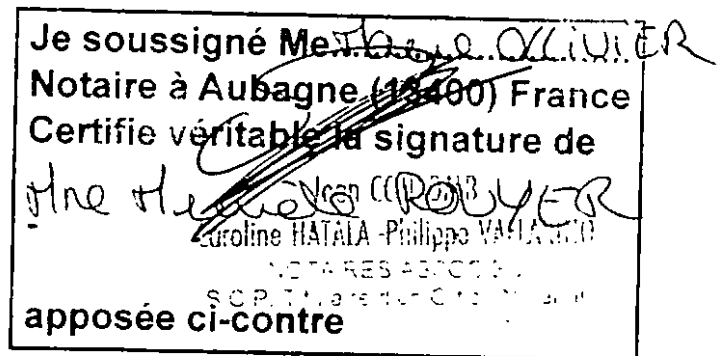
[Notary Seal]

Notaire à AUBAGNE
Notary Public

Printed Name: Thérèse OLIVIER

My Commission Expires: _____

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



b. No authority granted to: _____

Signature of authorized representative

Loic Lerville
Loic Lerville

Country of France

The foregoing instrument was sworn to and subscribed before me by means of ☒ physical presence
or ~~online~~ notarization this 18 day of FEBRUARY, 2020, by LOIC LERVILLE who
~~is personally known or~~ ☒ has produced FRANCE ID as identification.
At Edinburgh UK CARD

[Notary Seal]

Notary Public

Joseph Gordon Cameron
25 Rulland Street
EDINBURGH EH1 2RN UK

Printed Name: _____

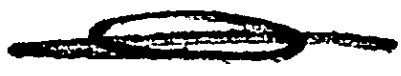
My Commission Expires: LIFETIME

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

b. No authority granted to: _____

Signature of authorized representative



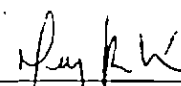
Antoine Gendre

~~County of Monroe~~ ^{MEL}
State of Florida County of Monroe ^{MEL}

The foregoing instrument was sworn to and subscribed before me by means of ☒ physical presence
or ☐ online notarization this 6th day of February, 2020, by Antoine Gendre who
☒ is personally known or ☐ has produced _____ as identification.

[Notary Seal]





Notary Public

Printed Name: Mary Rose Leon

My Commission Expires: Nov. 6th 2020

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)