

L14 000080801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

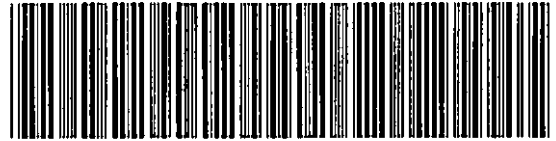
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 NOV -2 AM 7:02
TALLAHASSEE, FL

REC 10 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Weaverknitt Tech and More, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Igor Komeychik c/o Thomas B. Day

Name of Person

Firm/Company

2751 N Palm Aire Drive, #104

Address

Pompano Beach, FL 33069

City/State and Zip Code

tom@tomdayproperties.com

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

For further information concerning this matter, please call:

Joshua Pinsky

954

772-5151

Name of Person

at (

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

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 Weaverknu Tech and More, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000080801

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

3419 Beacon Street

Pompano Beach, FL 33062

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

3419 Beacon Street

Pompano Beach, FL 33062

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.

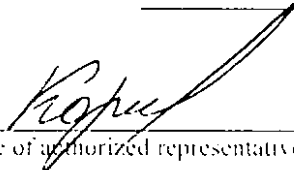
a. Granted to: Thomas B. Day

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: Thomas B. Day

b. No authority granted to: _____



Signature of authorized representative

Igor Korneychik

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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, Weaverknit Tech and More, LLC

SECOND: The Florida Document Number of the limited liability company is, L14000030801

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

3419 Beacon Street

Pompano Beach, FL 33062

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

3419 Beacon Street

Pompano Beach, FL 33062

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: Thomas B. Day

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: Thomas B. Day

b. No authority granted to:


Signature of authorized representative

Igor Korneychik

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

FILED
2020 NOV -2 AM 7:02
CLERK OF DISTRICT COURT
STATE OF FLORIDA