

L14 0000 88468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

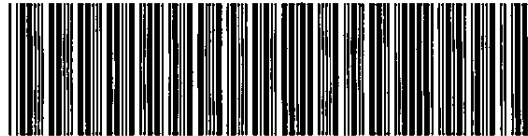
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000286940320

06/24/16--01020--002 **30.00

FILED

2016 JUN 24 P 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 27 2016
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: L.G. PEREZ GROUP 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:

LUIS PEREZ

Name of Person

L.G. PEREZ GROUP LLC

Firm/Company

2415 BISCAYNE BAY DRIVE

Address

NORTH MIAMI, FL 33181

City/State and Zip Code

gladysdelacruz@me.com

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

For further information concerning this matter, please call:

LUIS PEREZ

at (

305

335-8171

Name of Person

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

FILED
2016 JUN 24 P 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: L.G. PEREZ GROUP LLC

SECOND: The Florida Document Number of the limited liability company is: L14000088468

THIRD: The street address of the limited liability company's principal office is:
2415 BISCAYNE BAY DRIVE NORTH MIAMI, FL 33181

The mailing address of the limited liability company's principal office is:
2415 BISCAYNE BAY DRIVE NORTH MIAMI, FL 33181

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.

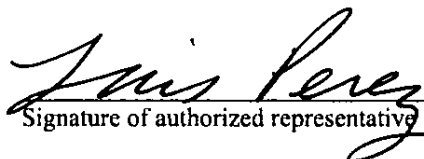
a. Granted to: LUIS PEREZ; GLADYS PEREZ; AND
GLADYS BEATRIZ DE LA CRUZ

b. No authority granted to: ANYONE NOT LISTED ABOVE

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

a. Granted to: LUIS PEREZ; GLADYS PEREZ; AND
GLADYS BEATRIZ DE LA CRUZ

b. No authority granted to: ANYONE NOT LISTED ABOVE


Signature of authorized representative

LUIS PEREZ

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

2016 JUN 24 P 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED