

06/05/2014 16:55

Division of Corporations

(FAX)

001/003  
Page 1 of 2

**Florida Department of State**  
Division of Corporations  
Electronic Filing Cover Sheet

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((H14000131714 3)))



H140001317143ABCV

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : PROFESSIONAL SERVICES  
Account Number : I20040000024  
Phone : (786) 303-5010  
Fax Number : (305) 403-1061

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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14 JUN -5 PM 4:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**RUBAL OTB 10410, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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K. SALY  
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Electronic Filing Menu

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Help

06/05/2014 16:55

(FAX)

P.002/003

414 000131714 3

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RUBAL OTB 10410, 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:

JAVIER BANOS, ESQ

Name of Person

LAW SERVICES, P.A.

Firm/Company

3126 Coral Way

Address

Miami, FL 33145

City/State and Zip Code

lawservicespa@gmail.com

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

For further information concerning this matter, please call:

Javier Banos, Esq

at

305

519-5581

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

06/05/2014 16:55

(FAX)

P.003/003

414000131714 3

### 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: RUBAL OTB 10410, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L14 000090067

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

8416 NW 201 ST

MIAMI, FL 33015-5978

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

8416 NW 201 ST

MIAMI, FL 33015-5978

FILED  
2014 JUN -5 AM 9:50  
CLERK OF DISTRICT COURT  
TALLAHASSEE, 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.

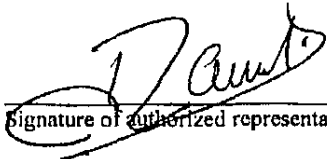
a. Granted to: RUBEN ALVAREZ

b. No authority granted to: RAIDEL ELIAS

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

a. Granted to: RUBEN ALVAREZ

b. No authority granted to: RAIDEL ELIAS

  
Signature of authorized representative

RUBEN ALVAREZ

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)