## L140000 93485

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



600277584026

10/05/15--01047--005 \*\*55.00

2015 OCT 26 PM 2: 41

OCT 28 2015 J. HARRIS Oct 26 15 05:03p

## **COVER LETTER**

TO: Registration Section Division of Corporations				
HAPPY DAY LLC				
	imited Liability Con	npany		
Dear Sir or Madam:				
The enclosed Statement of Authority and fee(s) are	e submitted for filing			
Please return all correspondence concerning this m	natter to the following	5:		
MARY YOUSSEF				
Name of Person		_		
HAPPY DAY LLC				
Firm/Company		-		
8330 SORBONNE				
Address		_		
BROSSARD,QUEBEC J4X 1Y8				
City/State and Zip Code	<u></u>	-		
mary_youssef@hotmail.com				
E-mail address: (to be used for future and	nual report notification	n)		
For further information concerning this matter, ple	ase call:			
Mary Youssef	450	672-7577	514. 315	7154
Name of Person	Area Code	Daytime Te	lephone 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





## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2015

HELMY SORIAL 476 TILFORD V DEERFIELD BEACH, FL 33442

SUBJECT: HAPPY DAY LLC Ref. Number: L14000093485

We have received your document for HAPPY DAY LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Statement of Authority has not been filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 015A00021329

2015 OCT 26 PM 2: 4 SECHETARY OF STATE

## STATEMENT OF AUTHORITY

uthority:	05.0302(1), Florida Statutes, this limited liability company submits the following statement of			
RST: The name	of the limited liability company is: HAPPY DAY LLC			
ECOND: The Florida Document Number of the limited liability company is: L14000093485				
URD: The street 476 Tilfo	address of the limited liability company's principal office is: rd V			
Deerfiled	l Beach, FL 33442			
	ng address of the limited liability company's principal office is:			
sition of a person i son on the follow	rement of authority grants or sets limitations of authority on all persons having the status or n a company, whether as a member, transferee, manager, officer or otherwise or to a specific ing:			
a.	Granted to: HELMY SORIAL 41%, MARY YOUSSEF 41%, WAHIB YOUSSEF 9% AND JANETTE YOUSSEF9%			
b.	No authority granted to:			
2. May er	ter into other transactions on behalf of, or otherwise act for or bind, the company.  Granted to: WAHIB YOUSSEF 9%			
b.	No authority granted to:			
Mayor nature of authorize	HSOEIAL Mary Jourse & Helmy Son Typed preprinted name of signature V			