

L14000121423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

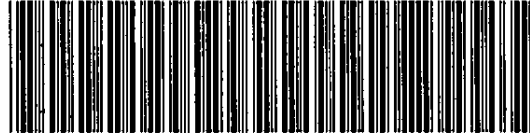
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

5326 Aguilinda LLC

SUBJECT:

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:

Boris Topliyer

Name of Person

5326 Aguilinda Blvd LLC

Firm/Company

12995 S Cleveland Ave Suite 248

Address

Fort Myers FL 33907

City/State and Zip Code

btopik@gmail.com

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

For further information concerning this matter, please call:

Name of Person

Boris Topliyer

at

Area Code

839

Daytime Telephone Number

603-4208

STREET/COURIER ADDRESS:

Registration Section

Division of Corporations

Cifron Building

2661 Executive Center Circle

Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E138 (2/14)

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: 5326 Agualinda Blvd LLC

SECOND: The Florida Document Number of the limited liability company is: L14000121423

THIRD: The street address of the limited liability company's principal office is:
12995 S Cleveland Ave Suite 248 Fort Myers FL 33908

The mailing address of the limited liability company's principal office is:
12995 S Cleveland Ave Suite 248 Fort Myers FL 33908

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: Boris Topilyer

b. No authority granted to: _____

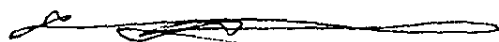
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company

a. Granted to: Boris Topilyer

b. No authority granted to: _____

2016 APR 26 A 9 34
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED


Signature of authorized representative

Boris Topilyer
Typed or printed name of signature

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