

L14000135340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 4 2015

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hadwankedzo Properties 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:

Carla Di Clemente, Registered Agent
Name of Person

Firm/Company

2365 NW 70 Avenue, Unit C-9
Address

Miami, Florida 33122
City/State and Zip Code

diclementecarla@gmail.com
E-mail address: (to be used for future annual report notification) For further

information concerning this matter, please call:

Carla Di Clemente at (786) 220-0022
Name of Person (Area Code) Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
32314 Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
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: Hadwankedzo Properties LLC.


SECOND: The Florida Document Number of the limited liability company is: L14000135340.

THIRD: The street address of the limited liability company's principal office is: 951 Brickell Avenue, Apt. 3206, Miami, Florida 33131.

The mailing address of the limited liability company's principal office is: 2365 NW 70th Avenue, Unit C-9, Miami, Florida 33122.

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:

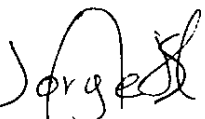
1. May execute an instrument transferring real property held in the name of the company.
 - a. Granted to: Nikola A. Kedzo, Manager/Member.
 - b. No authority granted to: N/A.
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
 - a. Granted to: Nikola A. Kedzo, Manager/Member.
 - b. No authority granted to: N/A.



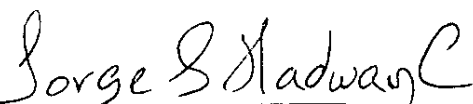
Signature of authorized representative
Nikola A. Kedzo

Nikola Kedzo

Typed or printed name of signature



Signature of authorized representative
Jorge A. Hadwan



Typed or printed name of signature

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

CR2E138 (2/14)

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