

L14 000154913

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GRDN, 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:

Gerardo M. Norona

Name of Person

GRDN, LLC

Firm/Company

101 Sidonia Avenue # 302

Address

Coral Gables, Florida 33134

City/State and Zip Code

rcnorona@bellsouth.net

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

For further information concerning this matter, please call:

Roberto C. Norona

786

457-3169

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: GRDN LLC

SECOND: The Florida Document Number of the limited liability company is: L14000154913

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

101 Sidonia Avenue #302

Coral Gables, Florida 33134

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

101 Sidonia Avenue #302

Coral Gables, Florida 33134

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

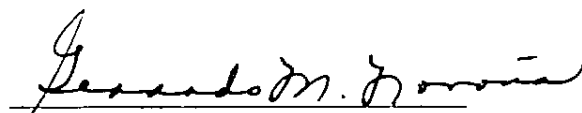
a. Granted to: Roberto C. Norona or Daniel A. Norona or
Gerardo M. Norona

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: Roberto C. Norona or Daniel A. Norona or
Gerardo M. Norona

b. No authority granted to: N/A


Signature of authorized representative

Gerardo M. Norona
Typed or printed name of signature

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

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STATE OF FLORIDA