

U400163901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300286558653

06/07/16--01024--011 **25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN - 7 AM 1:38

JUN 08 2016
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Alfa Capital Holdings, 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:

Manuel L. Crespo, Esq.

Name of Person

Greenspoon Marder PA

Firm/Company

600 Brickell Avenue, Suite 2600

Address

Miami, FL 33131

City/State and Zip Code

manny.crespo@gmlaw.com

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

For further information concerning this matter, please call:

Manuel L. Crespo

at (305) 789-2770

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

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
16 JUN -7 AM 1:39

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: Alfa Capital Holdings, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000163901

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

4420 Bay Point Road

Miami, FL 33137

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

4420 Bay Point Road

Miami, FL 33137

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.

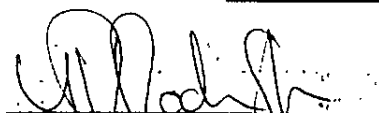
a. Granted to: Francisco Rodriguez

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: Francisco Rodriguez

b. No authority granted to: _____


Signature of authorized representative

Yvonne Stam

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN -7 AM 1:39