

L14000192027

(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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2024 APR 29 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Giverny Investments, LLC

Please Debit FCA000000003 For: 55

Thank you Seth Neeley



Signature

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ ☒ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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: GIVERNY INVESTMENTS, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000192027.

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

2300 CORAL WAY, SUITE 200
MIAMI, FLORIDA 33145

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

2300 CORAL WAY, SUITE 200
MIAMI, FLORIDA 33145

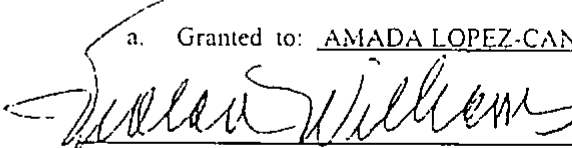
FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.

a. Granted to: AMADA LOPEZ-CANTERA

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

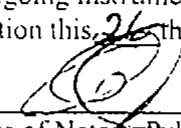
a. Granted to: AMADA LOPEZ-CANTERA


VIVIAN WILLIAMS, MANAGER

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TALLAHASSEE, FLORIDA

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me by means of ☒ physical presence or () online notarization this 26th day of April, 2024, by Vivian Williams.


Signature of Notary Public
Print, Type/Stamp Name of Notary



OLGAA. RAMIREZ
Commission # HH 512107
Expires May 4, 2028

Personally Known: ☒ OR Produced Identification: _____
Type of Identification: _____
Produced: _____