

L15000072400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

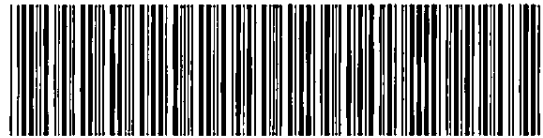
(Document Number)

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FILED
2025 MAY 15 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HGD 2225 PROPERTIES, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Helinel Montenegro
Name of Person

HGD 2225 Properties, LLC
Firm/Company

2225 W 76 Street
Address

Hialeah, FL 33016
City/State and Zip Code

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

For further information concerning this matter, please call:

Helinel Montenegro at (305) 990-3924
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: HGD 2225 PROPERTIES, LLC

SECOND: The Florida Document Number of the limited liability company is: L15000072400

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

2225 W 76 Street

Hialeah, Florida 33016

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

2225 W 76 Street

Hialeah, Florida 33016

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.

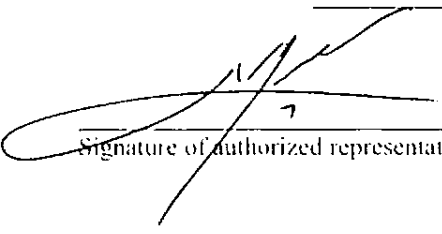
a. Granted to: Gabriel Montenegro

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: Gabriel Montenegro

b. No authority granted to: _____


Signature of authorized representative

Helinel Montenegro

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA