L15000073349

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
		· .





700376736407

i...a.da==01021==118 *>25.00





COVER LETTER

TO: Registration Section Division of Corporations	RECEIVED
SUBJECT: DY PEGHY GOP 11 Name of Limited Liability Company	SECRETALLAHASSEE, FL
Dear Sir or Madam:	IALLANASSECTE
The enclosed Statement of Authority and (ec(s) are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
Carol La Cayo or Lisand	no lacayo
DK Reaty Group - Sub 2, LL Firm/Company	
9841 NW Z6ST. Address	
Doral to 33172 City/State and Zip Code	
Carollacayo @ hotmail. co E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Carol la Cayo at (305) 7 of Area Code Day	81-3675 time 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

RECEIVED

STATEMENT OF AUTHORITY

authority	
FIRST:	The name of the limited liability company is: DY REQITY 600 UP, 5062, i
SECON	D: The Florida Document Number of the limited liability company is: <u>L150000733</u> +C
THIRD:	The street address of the limited liability company's principal office is: 9841 W 26th ST Docal, Ft. 33172
	The mailing address of the limited liability company's principal office is: 9841 NW Zlost Doral Ft 33172
position	H: This statement of authority grants or sets limitations of authority on all persons having the status or of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific in the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to:
	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: Carol Lacayo of Lacayo.
	b. No authority granted to:
Signatur	e of authorized representative Filing Fee: \$25.00 Carol Cargo Typed or printed name of signature

Certified Copy: \$30.00 (optional)

STATEMENT OF AUTHORITY

ursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of uthority:	
IRST: The name of the limited liability company is: DV REGITY 600 UP, 5062,	UC
ECOND: The Florida Document Number of the limited liability company is: 615000073340	7
HIRD: The street address of the limited liability company's principal office is: 9841 W 76th ST Do Cal, Ft. 33172	
The mailing address of the limited liability company's principal office is: 9841 NW Zlo (T Doral, Fr. 33172	
OURTH: This statement of authority grants or sets limitations of authority on all persons having the status or osition of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific erson on the following:	
a. Granted to: Canblacayo of Lisandro La cayo	
b. No authority granted to:	
a. Granted to: La Cayo.	
b. No authority granted to:	
ignature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	