

L15000096625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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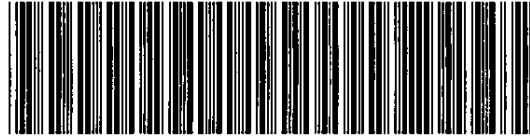
(Business Entity Name)

(Document Number)

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STATE OF MISSISSIPPI  
DEPARTMENT OF REVENUE

16 JUN 14 AM 7:24

STATE OF MISSISSIPPI  
DEPARTMENT OF REVENUE

2016 JUN 13 PM 12:42

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

Miami Gardens 2608 LLC

**SUBJECT:** \_\_\_\_\_  
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:

**Miguel Angel Quintero**

\_\_\_\_\_  
Name of Person

Miami Gardens 2608 LLC

\_\_\_\_\_  
Firm/Company

PO Box 490718

\_\_\_\_\_  
Address

Key Biscayne, Florida 33149

\_\_\_\_\_  
City/State and Zip Code

Miguel Quintero 99@Hotmail.com

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

For further information concerning this matter, please call:

**Miguel Angel Quintero**

**954**

**214-3457**

\_\_\_\_\_  
Name of Person at (\_\_\_\_\_) \_\_\_\_\_  
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

**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: Miami Gardens 2608 LLC

**SECOND:** The Florida Document Number of the limited liability company is: L 15000096625

**THIRD:** The street address of the limited liability company's principal office is:  
240 Crandon Blvd., # 287  
Key Biscayne, Florida 33149

The mailing address of the limited liability company's principal office is:  
PO Box 490718  
Key Biscayne, Florida 33149

**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: Miguel Angel Quintero

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: Maria C. Quintero

b. No authority granted to: N/A

16 JUN 14 AM 7:24  
STATE OF FLORIDA  
DEPARTMENT OF REVENUE

  
Signature of authorized representative

Miguel Angel Quintero  
Typed or printed name of signature

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