

215 000 105745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

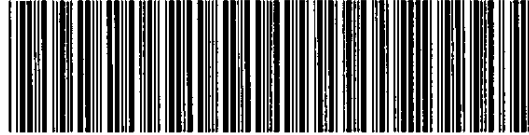
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 18 2015

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

US Glow Tek 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:

Euribiades Cerrud II, Esq.

Name of Person

Pesquera, Cerrud & Birmingham, P.A.

Firm/Company

219 North Magnolia Avenue

Address

Orlando, Florida 32801

City/State and Zip Code

Euri@thePCBfirm.com

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

For further information concerning this matter, please call:

Euribiades Cerrud II, Esq.

407

545-5351

at (_____) _____

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

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: US Glow Tek LLC

SECOND: The Florida Document Number of the limited liability company is: L15000105745

THIRD: The street address of the limited liability company's principal office is:
4307 VINELAND RD

SUITE H3

ORLANDO, FL 32811

The mailing address of the limited liability company's principal office is:
4307 VINELAND RD

SUITE H3

ORLANDO, FL 32811

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:

Mario A. Ragazzo and Daniel Musacchio

- a. Granted to: _____

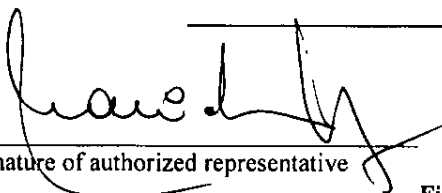
- b. No authority granted to: _____

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

Mario A. Ragazzo and Daniel Musacchio

- a. Granted to: _____

- b. No authority granted to: _____


Signature of authorized representative

Mario A. Ragazzo

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA