

LIS000117662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

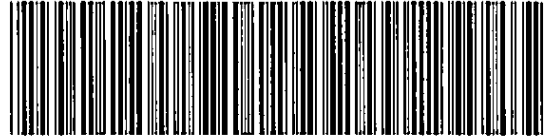
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 SEP 26 AM 11:12
SECRETARY OF STATE
HARRISBURG, PA 17104

M. MILLIGAN
OCT 18 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2018

BOILING CRAB RESTAURANT CRAB, LLC
MARIA STONEHOUSE
14331 EUCLID ST, STE. 207
GARDEN GROVE, CA 92843

SUBJECT: PB ASSETS LLC
Ref. Number: L15000117662

We have received your document for PB ASSETS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 918A00020412

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PB ASSETS LLC

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:

Julie G. Cohen

Name of Person

Strock & Cohen Zipper Law Group, P.A

Firm/Company

2900 Glades Circle Ste 750

Address

Weston, FL 33327

City/State and Zip Code

jcohen@strocklaw.com

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

For further information concerning this matter, please call:

Julie G Cohen

Name of Person

954

at (_____) Area Code

6592220

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: PB ASSETS LLC

SECOND: The Florida Document Number of the limited liability company is: L15000117662

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

1565 North Park Drive Ste 100

Weston, FL 33327

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

1565 North Park Drive Ste 100

Weston, FL 33327

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: PATRICIO BERSTEIN or

ROSA MARIA BERSTEIN

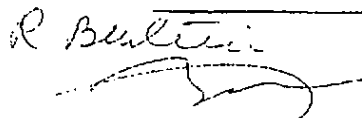
b. No authority granted to: _____

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

a. Granted to: PATRICIO BERSTEIN or

ROSA MARIA BERSTEIN

b. No authority granted to: _____



Signature of authorized representative

Rosa Maria Berstein

Patricio Berstein

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA