

215000 123 1167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600326015556

03/18/19--01018--001 \*\*25.00

FILED  
2019 MAR 18 PM 5:38  
STATE OF MICHIGAN  
TALLEN, SEYMOUR

R. WHITE  
MAR 20 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**Delia Hospitality LLC**

**SUBJECT:** \_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

**Erik Lichter, Esq.**

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

**Acosta & Lichter P.A.**

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

**2930 NW 7 Avenue, 2nd Floor**

\_\_\_\_\_  
Address

**Miami, Florida 33127**

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

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

For further information concerning this matter, please call:

**Erik Lichter, Esq.**

**305**

**982-7886**

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: Delia Hospitality LLC

SECOND: The Florida Document Number of the limited liability company is: L15000123167

THIRD: The street address of the limited liability company's principal office is:  
10726 NW 58 Street  
Doral, Florida 33178

The mailing address of the limited liability company's principal office is:  
10726 NW 58 Street  
Doral, Florida 33178

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: Vincenzo Alaimo or VCA Development Inc.

b. No authority granted to: Delia Hospitality Inc., or Calogero Alaimo

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

a. Granted to: Vincenzo Alaimo or VCA Development Inc.

b. No authority granted to: Delia Hospitality Inc., or Calogero Alaimo

  
\_\_\_\_\_  
Signature of authorized representative

Vincenzo Alaimo  
\_\_\_\_\_  
Typed or printed name of signature

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

FILED  
2019 MAR 18 PM 5:38  
FILED