

L15000123866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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ALABAMA

D. BRUCE  
DEC 01 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FIMARA 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:

Sarah Barbaccia

Name of Person

Sarah Barbaccia, P.A.

Firm/Company

942 SW 93 Terrace

Address

Plantation, FL 33324

City/State and Zip Code

sbarbaccia@barbaccialaw.com

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

For further information concerning this matter, please call:

Sarah Barbaccia

Name of Person

at ( 954 )

Area Code

748-4890

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

2018 NOV 20 PM 1:26

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### 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: FIMARA LLC

**SECOND:** The Florida Document Number of the limited liability company is: L15000123866

**THIRD:** The street address of the limited liability company's principal office is:  
805 N. ANDREWS AVENUE

FT. LAUDERDALE, FL 33311

The mailing address of the limited liability company's principal office is:  
805 N. ANDREWS AVENUE

FT. LAUDERDALE, FL 33311

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CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

**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: Sarah Barbaccia, Esq.

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 : Sarah Barbaccia, Esq.

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a. Granted to: Sarah Barbaccia, Esq.

b. No authority granted to: \_\_\_\_\_

  
\_\_\_\_\_  
VINCENT FRERINC

COUNTRY OF FRANCE

The foregoing instrument was sworn and subscribed before me this 12<sup>th</sup> day of NOVEMBER, 2018, by VINCENT FRERINC, who produced PASSPORT as identification.

SEAL:



\_\_\_\_\_  
Notary Public

Marc VAN GORP  
Printed Notary Name

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

Je soussigné, Monsieur Marc Van GORP, notaire à LYON, certifie que la signature apposée ci-dessus émane de Monsieur Vincent FRERINC

