

L15000124735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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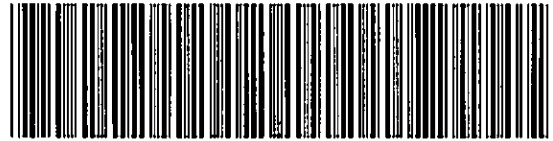
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AMERICAN SOCIAL TAMPA, 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:

JOSEPH P. KLAPHOLZ, Esq.

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

JOSEPH P. KLAPHOLZ, P.A.

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

7951 S.W. 6th STREET, Suite # 210

\_\_\_\_\_  
Address

PLANTATION, FLORIDA 33324

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

jklap@klapholzpa.com

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

For further information concerning this matter, please call:

JOSEPH P. KLAPHOLZ, ESQ

954

925-3355

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

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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: AMERICAN SOCIAL TAMPA, LLC

SECOND: The Florida Document Number of the limited liability company is: L15000124735

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

601 S. Harbour Island Blvd., Suite # 107

Tampa, Florida 33602

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

1401 East Broward Boulevard, Suite # 305

Fort Lauderdale, Florida 33301

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: Laurie D. Mijares, Richard J. Mijares, Anthony Mijares, Jr., and

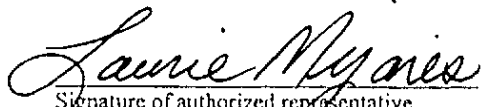
Paul Greenberg the authority to enter into and bind the Company to Real Estate Leases only.

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: Richard J. Mijares, Anthony Mijares, Jr.

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

  
Signature of authorized representative

LAURIE MIJARES  
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)