

L15000139170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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BREIT LAW

8551 West Sunrise Boulevard, Suite 300, Plantation, FL 33322-4007
Telephone 954.452.1144 • Fax 954.452.3311 • E-Mail rbreit@rhbpa.com

March 21, 2017

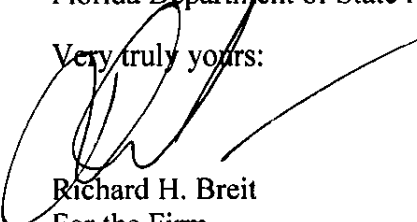
Division of Corporations
Registration Section
PO Box 6327
Tallahassee, FL 32314

Re: Statements of Authority for Gamani LLC, Liozel Properties LLC, Liozie Properties LLC,
Liozas Properties LLC, GMNCB "LLC", BBPJJB, LLC, and Flocober Invest One LLC

Dear Sir or Madam:

We are enclosing the Statements of Authority noted above as well as a check for \$175 payable to Florida Department of State representing the filing fee for the seven documents.

Very truly yours:



Richard H. Breit
For the Firm
RHB/dj
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Flocober Invest One 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:

Richard H. Breit

Name of Person

Breit Law

Firm/Company

8551 West Sunrise Boulevard, Suite 300

Address

Plantation, FL 33322-4007

City/State and Zip Code

rbreit@rbpa.com

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

For further information concerning this matter, please call:

Richard H. Breit

at (954) 452-1144

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: Flocober Invest One LLC

SECOND: The Florida Document Number of the limited liability company is: L15000139170

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

2871 Somerset Dr. #200

Lauderdale Lakes, FL 33311

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

2871 Somerset Dr #200

Lauderdale Lakes, FL 33311

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: Jean-Jacques Berlioz, Nicolas Berlioz and John Stalmach may all individually execute documents

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: _____

b. No authority granted to: _____

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Signature of authorized representative

Nicolas Berlioz
Typed or printed name of signature

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