

L15000139170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

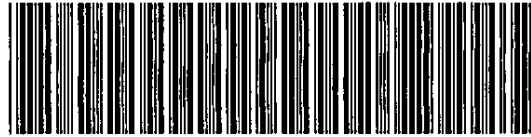
(Business Entity Name)

(Document Number)

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

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**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

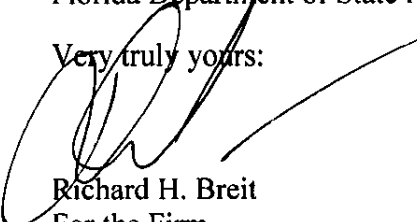
Division of Corporations  
Registration Section  
PO Box 6327  
Tallahassee, FL 32314

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)