

L15 000 140404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

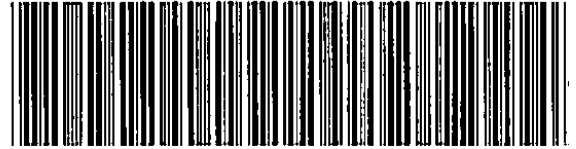
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Statement
of
Authority

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROSIRIS ARRIAGA PLLC

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:

Rosiris Arriaga

Name of Person

Rosiris Arriaga, PLLC

Firm/Company

650 NE 32 ST - Suite 907

Address

Miami FL 33137

City/State and Zip Code

iarriaga@rosiarriaga.com

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

For further information concerning this matter, please call:

Ysilio Arriaga

305

335-4967

at (_____) _____

Name of Person

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: ROSIRIS ARRIAGA, PLLC = Meeting held on May 1, 202
Authority granted to Rosiris Arriaga to executed the documents specified below in SECTION (4)(2)(a)

SECOND: The Florida Document Number of the limited liability company is: 115000140404

THIRD: The street address of the limited liability company's principal office is:
650 NE 32 ST, SUITE 907 MIAMI FL 33137

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

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: _____

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 : AND/OR ASSUME AND SIGN ALL NECESSARY SBA
LOAN DOCUMENTS IN THE AMOUNT OF US\$ 5,500

b. No authority granted to: _____


Signature of authorized representative

ROSIRIS ARRIAGA

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

2020 NOV 16 PM 2:35