## L15000158084

(Re	questor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Oil	y/Otate/Zip/Fillone	· #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



500299976115

06/13/17--01013--016 \*\*25.00

FILED

BIT JUN 13 PH 3: 21

SECRETARY OF STATE

J. HARRIE

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE	MCD ALL VARIETY, LLC		
SCDJE		mited Liability Com	pany
Dear Si	ir or Madam:		
The end	closed Statement of Authority and fee(s) are	submitted for filing.	
Please	return all correspondence concerning this ma	tter to the following:	
Seth	Huberman, Esq.		
	Name of Person		
Hube	rman & Associates		
	Firm/Company		
5439	NW 42nd Avenue		
	Address		
Boca	Raton, FL 33496		
	City/State and Zip Code		
seth@	hubermaninc.com		
	E-mail address: (to be used for future annu	al report notification	)
For furt	ther information concerning this matter, pleas	se call:	
Matth	ew Doherty	561	255-3335
	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	Registrati Division o P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314

## STATEMENT OF AUTHORITY

authority:	on 605.0302(1), Florida Statutes, this limited liability company submits the follow	ing staten	nent o	f
FIRST: The nar	me of the limited liability company is: MCD ALL VARIETY, LLC			_
SECOND: The	Florida Document Number of the limited liability company is:	1		
THIRD: The str	reet address of the limited liability company's principal office is: Floweva Street			
Palm	Springs, FL 33406			
	nailing address of the limited liability company's principal office is: Floweva Street			
Palm	Springs, FL 33406			
position of a pers person on the fol	s statement of authority grants or sets limitations of authority on all persons having son in a company, whether as a member, transferee, manager, officer or otherwise lowing:  y execute an instrument transferring real property held in the name of the company  a. Granted to: Matthew Doherty, Manager -OR-  Gary S. Lee, Manager	or to a spo	ecific	-ainey
	b. No authority granted to:	AETARY OF S	2017 JUN 1 3 PM 3:	
2. Ma	a. Granted to:  Matthew Doherty, Manager -OR- Gary S. Lee, Manager	JRIJATE AMBA	<del>3:</del> 2+	, gar 2, ex
	b. No authority granted to:			
N MIL	Matthew Doherty			
Signature of auth	Filing Fee: \$25.00  Certified Copy: \$30.00 (optional)	`signature	<b>:</b>	