

615 000 183107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

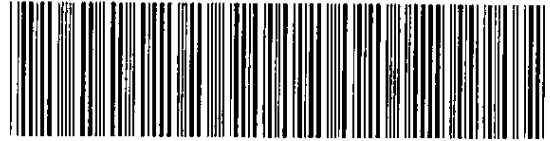
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2024 AUG 15 AM 10:34
STATE
TALLAHASSEE, FL

2024 AUG 15 PM 12:08
STATE
TALLAHASSEE, FL

RECEIVED

08/15/24

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160: \$ 25.00

AUTHORIZATION SIGNATURE: *Jan Fub*

Behazlacha 1800 LLC L1500013107

BUSINESS (Name)

Document #.

☐ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certified Copies of Articles of Organization

☐ Certificate of Status

RECEIVED
FEB 10 10:34
STATE OF FLORIDA

NEW FILINGS

☐ Profit

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ CORP

☐ LLLP

AMMENDMENTS

☐ Amendment

☐ Resignation of R.A. Officer/Director

☐ Change of Registered Agent

☐ Dissociation or Resignation

☐ Merger

☐ Conversion

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

☐ APOSTIL ()

Country

REGISTRATION/QUALIFICATIONS

☐ Foreign Filing

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☒ STATEMENT OF AUTHORITY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEHAZLACHA 1800 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:

STEWART A. MERKIN, ESQ.

Name of Person

LAW OFFICE OF STEWART A. MERKIN, P.A.

Firm/Company

4450 LAKE ROAD

Address

MIAMI, FL 33137

City/State and Zip Code

ellymiami@aol.com

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

For further information concerning this matter, please call:

STEWART A. MERKIN at 305 989-3477
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: BEHAZLACHA 1800 LLC

SECOND: The Florida Document Number of the limited liability company is: 1.15000183107

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

4450 LAKE ROAD

MIAMI, FL 33137

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

4450 LAKE ROAD

MIAMI, FL 33137

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: STEWART A. MERKIN

b. No authority granted to: N/A

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: N/A

b. No authority granted to: N/A

[Signature]
Signature of authorized representative

YISHAYAHU D. IVRI

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)