

L16000070148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

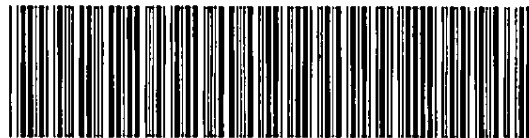
(Business Entity Name)

(Document Number)

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

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2022 MAR 15 PM 12:30  
CLERK OF DISTRICT COURT  
STATE OF FLORIDA

C. BRUMBLEY  
MAR 29 2022

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JOLIE & JELO 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:

ELODIE MESSIKA

\_\_\_\_\_  
Name of Person

JOLIE & JELO LLC

\_\_\_\_\_  
Firm/Company

8664 GRIFFIN ROAD

\_\_\_\_\_  
Address

COOPER CITY 33328 FL

\_\_\_\_\_  
City/State and Zip Code

ttlandboutique@yahoo.com

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

For further information concerning this matter, please call:

ELODIE MESSIKA

754  
at (\_\_\_\_\_) \_\_\_\_\_

8160325

\_\_\_\_\_  
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: JOLIE & JELO LLC

SECOND: The Florida Document Number of the limited liability company is: 116000070148

THIRD: The street address of the limited liability company's principal office is:  
8664 GRIFFIN ROAD COOPER CITY FL 33328

The mailing address of the limited liability company's principal office is:  
8664 GRIFFIN ROAD COOPER CITY FL 33328

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: MATHILDE ACKENINE

b. No authority granted to: \_\_\_\_\_

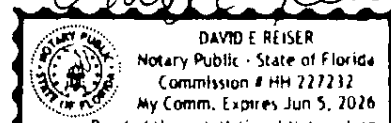
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: \_\_\_\_\_

b. No authority granted to: \_\_\_\_\_

Signature of Elodie Messika Representative County of Broward  
The foregoing instrument was acknowledged before me on this 19 day of March, 2022.  
By Elodie Messika  
Personally known ✓ OR produced identification ✓  
Type of identification produced FD-302 License

ELODIE MESSIKA  
Typed or printed name of signature



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2022 MAR 15 PM 12:30