

L16 0000 79099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

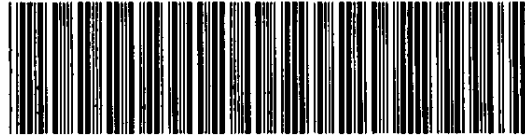
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500286367805

06/20/16--01031--028 **25.00

2016 JUN 20 P 12:54
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

JUN 21 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Trap God Bail Bonds

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:

Jonathan Crespo

Name of Person

Trap God Bail Bonds

Firm/Company

5715 Northwest 2nd Avenue

Address

Miami, Florida 33127

City/State and Zip Code

TrapGodBailBonds@Gmail.com

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

For further information concerning this matter, please call:

Jonathan Crespo

Name of Person

at (

305

)
Area Code

244-7388

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: Trap God Bail Bonds

SECOND: The Florida Document Number of the limited liability company is: L16000079099

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

5715 Northwest 2nd Avenue

Miami, Florida 33127 #806

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

5715 Northwest 2nd Avenue

Miami, Florida 33127 #806

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: Owner: Jonathan Crespo

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: Owner: Jonathan Crespo

b. No authority granted to: _____

Signature of authorized representative

Jonathan Crespo

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

FILED

2012 JUN 20 P 12:54

SECRETARY OF STATE
TAMPA FLORIDA