16000100832

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D. SCOTT

COVER LETTER

	gistration Section vision of Corporations			
eun inzer.	GS CAPITAL INVEST LLC			
SUBJECT: Name of Limited Liability Company				
Dear Sir or	Madam:			
The enclose	d Statement of Authority and fee(s) are s	ubmitted for filing.		
Please return	n all correspondence concerning this mat	ter to the following	:	
Joseph E	3. Ryan III, Esq.			
	Name of Person			
Joseph E	B. Ryan III, P.A.			
	Firm/Company			
8925 SV	V 148th Street, Suite 210			
	Address			
Palmetto	Bay, FL 33176			
	City/State and Zip Code			
jbryanlav	v@gmail.com			
E-1	mail address: (to be used for future annua	l report notification	1)	
For further i	information concerning this matter, please	e call:		
Joseph E	3. Ryan III	305 _ at (444-4949	
	Name of Person	Area Code	Daytime Telephone Number	
Reg	REET/COURIER ADDRESS: gistration Section vision of Corporations	Registrat	G ADDRESS: ion Section of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

CR2E138 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

Pursuant authority	to section 605.0302(1), Florida Statutes, this limited liabili	ity company submits the following statement of		
FIRST:	The name of the limited liability company is: GS CAPI			
SECON	D: The Florida Document Number of the limited liability of	company is: L16000100832		
THIRD:	The street address of the limited liability company's prince 1340 Stirling Road, Unit #6 B, Dania Beach,			
	The mailing address of the limited liability company's pr			
	1340 Stirling Road, Unit #6 B, Dania Beach, Florida 33004			
position	Th: This statement of authority grants or sets limitations of a person in a company, whether as a member, transferee on the following: 1. May execute an instrument transferring real property	fauthority on all persons having the status or e, manager, officer or otherwise or to a specifi		
	a. Granted to: Guy Amanou			
	b. No authority granted to:			
	2. May enter into other transactions on behalf of, or oth a. Granted to: bank account	• •		
	b. No authority granted to:			
Signatur	The same	Guy Amanou		
SiRusta	are of authorized representative	Typed or printed name of signature		