# L16000106039

(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



200351880002

09/10/20--01013--023 \*\*30.00

O SILANOMS OCT 21 2020

### **COVER LETTER**

SUBJECT:	ANTIKA USA LLC		
	Name of Lim	ited Liability Comp	oany
Dear Sir or Madam:			
The enclosed Statement of Aut	hority and fee(s) are su	ibmitted for filing.	
Please return all correspondence	ee concerning this matt	er to the following	
GARY GRANT (P/R of the Es	state of Andrey Pshenic	chnikov)	
Name	of Person		
ANTIKA USA	LLC		
Firm/	Company		
1498 SW 5th Avenue			
Ado	lress	<del>.</del>	
BOCA RATON, FL 33432			
City/State an	d Zip Code		
GARY.GRANT@GRANTLA	WCORP.com		
E-mail address: (to be	e used for future annua	l report notification	n)
For further information concer	ning this matter, please	e call:	
GARY GRANT		954 at (	304-3008
Name of Per	son		Daytime Telephone Number

## **Mailing Address:**

TO:

Registration Section Division of Corporations

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 authority	to section 605.0302(1), Florida Statutes, this limited liability company submits the follow r:	ing statement of
FIRST:	The name of the limited liability company is:  ANTIKA USA LLC	
SECON	D: The Florida Document Number of the limited liability company is: L16000106039	
THIRD:	The street address of the limited liability company's principal office is:  1498 SW 5th Avenue, Boca Raton FL 33432	
	The mailing address of the limited liability company's principal office is:  1498 SW 5th Avenue, Boca Raton FL 33432	
position (	H: This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise	
-	n the following:  1. May execute an instrument transferring real property held in the name of the company	<i>)</i> .
	a. Granted to:	
	b. No authority granted to:  AMBR ANDREY Y. DROBOT has no authority to sell, ecumbering or make any transactions with real property 116 Per Company of the c	duland Ol
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the compa	CT 06831
	b. No authority granted to:  AMBR ANDREY Y. DROBOT has no authority enter into other transactions on behalf of, or otherwise act or bind company	
Signature	Filing Fee: \$25.00 Up the State Certified Copy: \$30.00 (optional)	AMBR) esudedile signature GH GGULANIS

## STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of

RS1:	The name of the limited liability company is: ANTIKA USA LLC	
ECONI	The Florida Document Number of the limited liability company is: L16000106039	
	The street address of the limited liability company's principal office is:  1498 SW 5th Avenue, Boca Raton FL 33432	
	The mailing address of the limited liability company's principal office is: 1498 SW 5th Avenue, Boca Raton FL 33432	
sition o rson oi	H: This statement of authority grants or sets limitations of authority on all persons having f a person in a company, whether as a member, transferee, manager, officer or otherwise the following:  . May execute an instrument transferring real property held in the name of the company	or to a specific
	<ul> <li>a. Granted to:</li></ul>	eksleud Rol,
	May enter into other transactions on behalf of, or otherwise act for or bind, the compa	<i>CT06831</i> iny.
	b. No authority granted to:  AMBR ANDREY Y. DROBOT has no authority enter into other transactions on behalf of, or otherwise act or bind company  CARY GRAY  PERSONAL Repr  Typed or printed name of Filing Fee: \$25.00 Of the ESTA.  Certified Copy: \$30.00 (optional)	

CR2E138 (2/14)