

L16000150294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

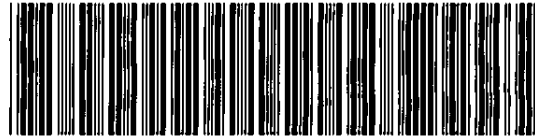
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300293560593

12/23/16--01020--017 **25.00

FILED
17 JAN 20 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

JAN 25 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G and Y Yoruba 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:

Glimandy Ge Vera.
Name of Person

G and Y Yoruba LLC.
Firm/Company

5921 E 2 Ave.
Address

Hialeah, FL 33013.
City/State and Zip Code

ile.adde@yahoo.com.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Glimandy Ge Vera at (786) 567-2908.
Name of Person Area Code 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

RECEIVED
2017 JAN 20 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
17 JAN 20 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: G and Y Youuba LLC.

SECOND: The Florida Document Number of the limited liability company is: L160000150296.

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

2170 NW 7th St
Miami FL 33125

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

5921 E 2 Ave.
Hialeah, FL 33013.

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: Glimandy Ge Vera
owner.

b. No authority granted to: Yadiel Ladron
de Guevara (second owner).

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

a. Granted to: Glimandy Ge Vera
owner.

b. No authority granted to: Yadiel Ladron
de Guevara (second).



Signature of authorized representative

Glimandy Ge Vera.
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

FILED
17 JAN 20 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA