

L170000026645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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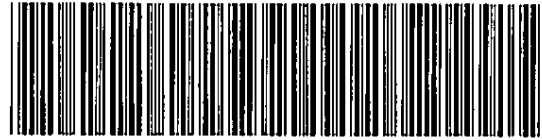
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NIBIRU PROPERTY 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:

Monika N. Aybar Landrau

Name of Person

AYBAR LANDRAU & NIZIO, P.L.

Firm/Company

25 SE 2nd Avenue, Suite 220

Address

Miami, FL 33131

City/State and Zip Code

pab943@hotmail.com

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

For further information concerning this matter, please call:

Monika N. Aybar Landrau

Name of Person

at ( 786 )

Area Code

369-8856 ext. 4

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: NIBIRU PROPERTY LLC

**SECOND:** The Florida Document Number of the limited liability company is: L17000026645

**THIRD:** The street address of the limited liability company's principal office is:  
19380 Collins Avenue  
1419  
Sunny Isles Beach, FL 33160

The mailing address of the limited liability company's principal office is:  
15757 Pines Blvd Suite 251  
c/o OTR Group Corp (Tax Firm)  
Hollywood, FL 33027

**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: Guillermo Hernan Bruzzone

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: Guillermo Hernan Bruzzone

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

  
\_\_\_\_\_  
Signature of authorized representative

Pascual Augusto Bruzzone  
Typed or printed name of signature

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

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