

L17000031198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

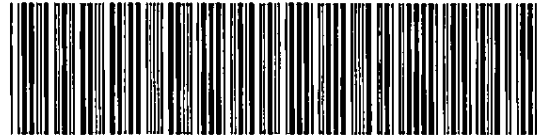
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LPM Investments LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul Feldman, Esq.

Name of Person

Paul Feldman, P.A.

Firm/Company

2750 NE 185th Street, Suite 203

Address

Aventura, FL 33180

City/State and Zip Code

paul@feldmanclosings.com

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

For further information concerning this matter, please call:

Paul Feldman, Esq.

305

931.0433

Name of Person

at (

_____)
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

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: LPM Investments LLC

SECOND: The Florida Document Number of the limited liability company is: L17000031198

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

5121 N 37th Street

Hollywood, FL 33021

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

5121 N 37th Street

Hollywood, FL 33021

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: Paul Feldman, Esq.

2750 NE 185th Street, Suite 203, Aventura, FL 33180

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: _____

b. No authority granted to: _____


Signature of authorized representative

Matan J. Yehudai
Typed or printed name of signature

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

17 DEC 20 PM 2:49
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CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA