

417 000 153661

(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



900303302469

09/25/17--01036--006 **55.00

FILED
17 SEP 25 AM 7:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 26 2017
J CHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BALDE FLORIDE, LLC, A Florida Limited Liability Company

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:

Thibaut Gueant

Name of Person

US Florida Property Management LLC

Firm/Company

17971 Biscayne Blvd. Suite 221

Address

Aventura, Florida 33160

City/State and Zip Code

THIBAUTGUEANT@GMAIL.COM

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

For further information concerning this matter, please call:

Thibaut Gueant

at (

954

)
Area Code

268-0306

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: BALDE FLORIDE, LLC

SECOND: The Florida Document Number of the limited liability company is: L17000153661

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

17971 BISCAYNE BLVD. SUITE 221

AVENTURA, FLORIDA 33160

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

17971 BISCAYNE BLVD. SUITE 221

AVENTURA, FLORIDA 33160

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: RAMATOULAYE MOUTON

b. No authority granted to: BALDE LA BAULE

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

a. Granted to: RAMATOULAYE MOUTON

b. No authority granted to: BALDE LA BAULE

FILED
17 SEP 25 AM 7:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Rme MOUTON
Signature of authorized representative

RAMATOULAYE MOUTON
Typed or printed name of signature

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