

10/29/2018

Division of Corporations

L18000312531 1123

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FELDMAN & ASSOCIATES
Account Number : I20130000018
Phone : (786)288-5699
Fax Number : (866)856-1462

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Paul@feldmanclosings.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JODIE SOCIETY LLC

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2018 OCT 30 AM 9:10

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18 OCT 30 AM 8:50

Electronic Filing Menu

Corporate Filing Menu

Help

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: JODIE SOCIETY LLC

SECOND: The Florida Document Number of the limited liability company is: L18000041123

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

c/o 2750 NE 185th STREET, SUITE 203

AVENTURA, FL 33180

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

c/o 2750 NE 186th STREET, SUITE 203

AVENTURA, FL 33180

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, Authorized Representative

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: PAUL FELDMAN, as Authorized Representative

b. No authority granted to: _____


Signature of authorized representative

Maro A. Bokobza, Manager
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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