

L18000051426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

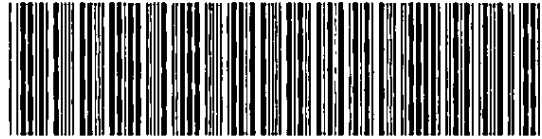
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/28/19 11:11:09 AM

FILED
2019 JAN 28 AM 11:09
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAGELWAY 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:

Michael I. Bernstein

Name of Person

The Bernstein Law Firm

Firm/Company

3050 Biscayne Boulevard, Suite #403

Address

Miami, FL 33137

City/State and Zip Code

michael@bernstein-lawfirm.com

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

For further information concerning this matter, please call:

Michael Bernstein

305

672-9544

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

FILED

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

2019 JAN 28 AM 11:09

FIRST: The name of the limited liability company is: BAGELWAY LLC

SECRETARY OF STATE
TALLAHASSEE, FL

SECOND: The Florida Document Number of the limited liability company is: L18000051426

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

23 NW 165th Street, Unit A

MIAMI, FL 33169

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

1523 NW 165th Street, Unit A

Miami, FL 33169

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.

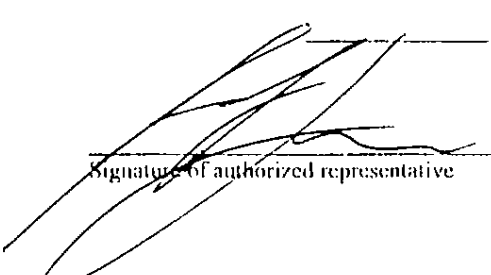
a. Granted to: TYXON GROUP LLC

b. No authority granted to: AURELLIA BEN TOV

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

a. Granted to: TYXON GROUP LLC

b. No authority granted to: AURELLIA BEN TOV


Signature of authorized representative

Chaim M Hazan, Manager

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)