

L180000052620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

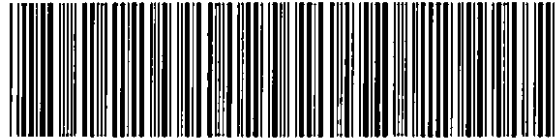
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300316287683

07/27/18 --01002--010 **125.00

FILED
18 JUL 26 PM 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JUL 26 AM 9:42

O SIMMONS
JUL 27 2018

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 7/26/2018

****WALK IN****

ENTITY NAME AKUMIN FL, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$25.00

CHECK # 5081

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AKUMIN FL, 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:

Deborah E. Kalstek, Paralegal

Name of Person

Hodgson Russ LLP

Firm/Company

140 Pearl St., Ste. 100

Address

Buffalo, NY 14202

City/State and Zip Code

rohit.navani@akumin.com

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

For further information concerning this matter, please call:

Deborah E. Kalstek

Name of Person

716

Area Code

848-1371

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: AKUMIN FL, LLC

SECOND: The Florida Document Number of the limited liability company is: 180000052620

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

8300 W. Sunrise Blvd.

Plantation, FL 33322

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

8300 W. Sunrise Blvd.

Plantation, FL 33322

FILED
JUL 26 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Riadh Zine-El-Abidine, President
Rohit Navani, Secretary

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: Riadh Zine-El-Abidine, President
Rohit Navani, Secretary

b. No authority granted to: _____

Rohit Navani
Signature of authorized representative

Rohit Navani
Typed or printed name of signature

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