

L18 0000063419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

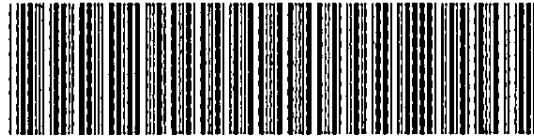
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/14/20--01011-023 2020 DEC 14 AM 7:08 25.00

CLERK OF COURT
TALLAHASSEE, FL

FILED

O SIMMONS

JAN 27 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GEO & COFFEE, 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:

Albert L. Kelley

Name of Person

Albert L. Kelley, P.A.

Firm/Company

926 Truman Ave.

Address

Key West, FL 33040

City/State and Zip Code

keywestlaw@gmail.com

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

For further information concerning this matter, please call:

Al Kelley

305
at (_____) _____

296-0160

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: GEO & COFFEE, LLC 2020 DEC 14 AM 7:08

SECOND: The Florida Document Number of the limited liability company is: L18000063419 STATE

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

1104 KEY PLAZA, #A

Key West, FL

33040

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

1104 KEY PLAZA, #A

Key West, FL

33040

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: Svetlana Viktorovna Zakariadze

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: Svetlana Viktorovna Zakariadze

b. No authority granted to: _____

Signature of authorized representative

Jacob Zakariadze

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)