

L180000 87912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

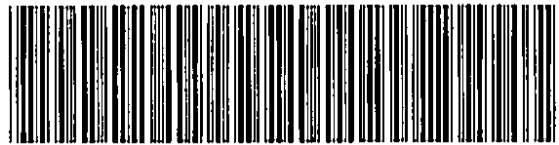
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAY 18 AM 7:46
FBI - JAX

D. BRUCE
MAY 19 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAADON 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:

ALI SAADON HASAN

Name of Person

SAADON LLC

Firm/Company

1377 S. WASHINGTON AVE

Address

CLEARWATER, FL 33756

City/State and Zip Code

alihan4471@yahoo.com

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

For further information concerning this matter, please call:

Ali Hasan

727

5203749

at (_____) _____

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: SAADON LLC

SECOND: The Florida Document Number of the limited liability company is: 83-1486360

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

1377 S. WASHINGTON AVE, CLEARWATER, FL 33756

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

1377 S. WASHINGTON AVE, CLEARWATER, FL 33756

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.

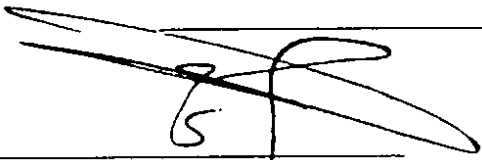
a. Granted to: _____

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: ARIAGNA MAHEL FIGUEREDO GARCIA

b. No authority granted to: _____



Signature of authorized representative

ALI SAADON HASAN

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**