

L18 000179039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

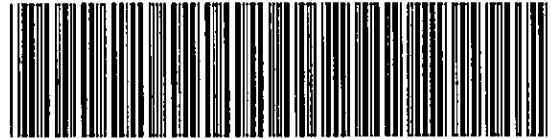
(Business Entity Name)

(Document Number)

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JUN 23 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CASH 4FL HOUSES, 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:

Arthur Botting

Name of Person

Cash 4FL Houses, LLC

Firm/Company

1982 SR 44, #162

Address

New Smyrna Beach, FL 32169

City/State and Zip Code

Arthur@cash4flhouses.com

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

For further information concerning this matter, please call:

Arthur Botting

310

927-9664

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: CASH 4FL Houses, LLC

SECOND: The Florida Document Number of the limited liability company is: L18000179039

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

1982 SR 44

162

New Smyrna Beach, FL 32169

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

1982 SR 44

162

New Smyrna Beach, FL 32169

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 specified person on the following:

1. May execute an instrument transferring real property held in the name of the company.

a. Granted to: Arthur Botting
Jennifer Laske

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: Arthur Botting
Jennifer Laske

b. No authority granted to: _____


Signature of authorized representative

Arthur Botting
Typed or printed name of signature

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

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