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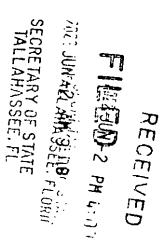
(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Q. SILAS JUN P3 FOLK						
JUN 83 TOLL						

Office Use Only



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	INC.	P.O. Box 370		•	Tallahassee, 0) 222-2666			(850) 222-1666	
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_	LUCH, LLC				<u></u>				
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(CORPORATE NAME AND DOCUMENT #)

SPECIAL
INSTRUCTIONS:

COVER LETTER

TO: Registration Section Division of Corporations		
Division of Corporations		
LUCH, LLC SUBJECT:		
	ne of Limited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fe	e(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
LEE GARIEPY		
Name of Person		
Firm/Company		
5664 Strand Ct		
Address		
Naples, FL 34110		
City/State and Zip Code		
E-mail address: (to be used for futt	ure annual report notification)
For further information concerning this matt	ter, please call:	
Lee Gariepy	239 at ()	2720030
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

CR2E138 (2/14)

FILED

STATEMENT OF AUTHORITY

2022 JUN -2 AM 9: 118

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

SECRETARY OF STATE TALLAHASSEE, FL FIRST: The name of the limited liability company is: 1.UCH, LLC SECOND: The Florida Document Number of the limited liability company is: THIRD: The street address of the limited liability company's principal office is: 16237 Camden Lakes Cir Naples, FL 34110 The mailing address of the limited liability company's principal office is: 16237 Camden Lakes Cir Naples, FL 34110 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. b. No authority granted to: 2. May enter into other transactions on behalf of, or otherwise act for or bind, the company. Andrey Doroshenko, as Manager Granted to: b. No authority granted to: Andrey Tolkachev, as Manager Signature of authorized representative Typed or printed name of signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)