

Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : US CONTADOR INC
 Account Number : 120200000121
 Phone : (770)928-2700
 Fax Number : (888)772-8108

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INTERNATIONAL PAYMENT COMPANY LLC

Certificate of Status	0
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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: INTERNATIONAL PAYMENT COMPANY LLC

SECOND: The Florida Document Number of the limited liability company is: L18000279122

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

9825 MARINA BLVD SUITE 100,

BOCA RATON, FL 33428

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

9825 MARINA BLVD SUITE 100,

BOCA RATON, FL 33428

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: PACHECO OROZCO, DIANA M

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: PACHECO OROZCO, DIANA M

b. No authority granted to: _____

Diana Pacheco
Signature of authorized representative

PACHECO OROZCO, DIANA M
Typed or printed name of signature