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L190000 15182

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

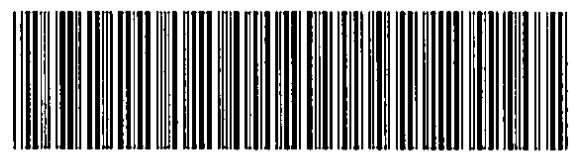
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_    Certificates of Status \_\_\_\_\_

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2019 JAN 28 10:54  
STATE OF MISSISSIPPI  
RECORDS SECTION

D. BRUCE  
JAN 28 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 3410 Lejeune, LLC, a Florida limited liability company

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:

Gary S. Glasser, Esq.

Name of Person

Gary S. Glasser, P.A.

Firm/Company

28 West Flagler Street, Suite 608

Address

Miami, Florida 33130

City/State and Zip Code

gsg50@msn.com

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

For further information concerning this matter, please call:

Gary S. Glasser, Esq.

305

377-4187

at ( )

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

FILED  
2019 JAN 22 AM 9:44  
TALLAHASSEE, FLORIDA

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: 3410 Lejeune, LLC, a Florida limited liability cc

SECOND: The Florida Document Number of the limited liability company is: L19000015182

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

c/o Gary S. Glasser, P.A.

28 W. Flagler Street, Suite 608

Miami, FL 33130

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

c/o Gary S. Glasser, P.A.

28 W. Flagler Street, Suite 608

Miami, FL 33130

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: Leon Azicri, Managing Member

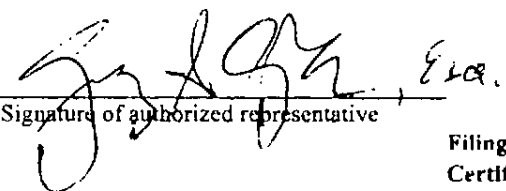
b. No authority granted to: n/a

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: n/a

b. No authority granted to: n/a

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2015 JAN 22 AM 9:54  
CLERK OF DISTRICT COURT  
MIAMI COUNTY FLORIDA

  
Signature of authorized representative

Gary S. Glasser, Esq.  
Typed or printed name of signature

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