

49000056164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 AUG - 4 PM 2:04

FILED

AUG 14 2013
T. LEMMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOOD FOR U 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:

RICARDO REY SOTOMAYOR

Name of Person

GOOD FOR U LLC

Firm/Company

8290 NW 14 ST

Address

DORAL FLORIDA 33126

City/State and Zip Code

ricardo.rey@g4uweb.com

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

For further information concerning this matter, please call:

Ricardo Rey Sotomayor

Name of Person

at (

786

_____)
Area Code

3256359

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

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: GOOD FOR U LLC

SECOND: The Florida Document Number of the limited liability company is: L19000056164

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

8290 NW 14 ST

DORAL FL 33126

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

8290 NW 14 ST

DORAL FL 33126

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, to a specific person on the following:

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

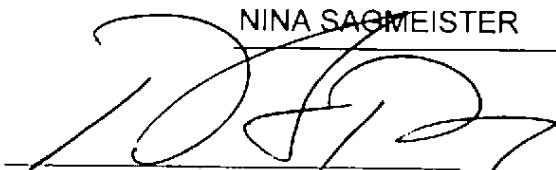
a. Granted to: RICARDO REY SOTOMAYOR

b. No authority granted to: OSCAR TIMPANARO AND
AND NINA SAGMEISTER

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

a. Granted to: RICARDO REY SOTOMAYOR

b. No authority granted to: OSCAR TIMPANARO AND
NINA SAGMEISTER


Signature of authorized representative

RICARDO REY SOTOMAYOR

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)