

L19000 12/199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

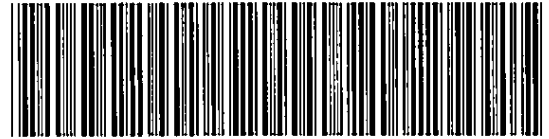
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 11406 CANYON MAPLE 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:

GESLE LETANG
Name of Person

11406 CANYON MAPLE LLC
Firm/Company

11406 CANYON MAPLE BOULEVARD
Address

DAVIE, FLORIDA 33330
City/State and Zip Code

gesle@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GESLE LETANG at (786) 487-4680
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:

2020 SEP 11 PM 6:51

FIRST: The name of the limited liability company is: 11406 CANYON MAPLE LLC

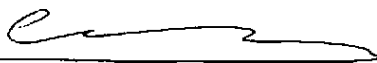
SECOND: The Florida Document Number of the limited liability company is: L19000121199

THIRD: The street address of the limited liability company's principal office is:
11406 CANYON MAPLE BOULEVARD
DAVIE, FLORIDA 33330

The mailing address of the limited liability company's principal office is:
11406 CANYON MAPLE BOULEVARD
DAVIE, FLORIDA 33330

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: SOLELY TO GESLE LETANG AS MEMBER
 - b. No authority granted to: WATSON PRINCE, SALOMON GLAUDE, MARIE GLAUDE OR ANYONE ELSE
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
 - a. Granted to: SOLELY TO GESLE LETANG AS MEMBER
 - b. No authority granted to: WATSON PRINCE, SALOMON GLAUDE, MARIE GLAUDE OR ANYONE ELSE



Signature of authorized representative

GESLE LETANG

Typed or printed name of signature

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

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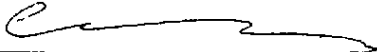
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Signature of authorized representative

GESLE LETANG
Typed or printed name of signature

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