

L19 000130944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

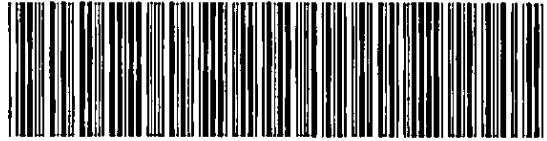
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOWING YOU, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK J. LABATE, ESQ.

Name of Person

MARK J. LABATE, P.A.

Firm/Company

2744 E. COMMERCIAL BLVD.

Address

FT. LAUDERDALE, FL 33308

City/State and Zip Code

markjlabate@gmail.com

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

For further information concerning this matter, please call:

MARK J. LABATE, ESQ.

at (954) _____

545-3605

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:

FIRST: The name of the limited liability company is: TOWING YOU, LLC

SECOND: The Florida Document Number of the limited liability company is: 119000130944

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

12781 NW 75TH STREET

PARKLAND, FL 33076

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

12781 NW 75TH STREET

PARKLAND, FL 33076

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: RAZVAN IOAN ANTINIE and MARKUS ARDELEAN, either
of whom may act.

b. No authority granted to: _____
(Ownership interest pledged)

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

a. Granted to: RAZVAN IOAN ANTINIE, MARKUS ARDELEAN, either
of whom may act.

b. No authority granted to: _____



Signature of authorized representative

MARK J LABATE, ATTORNEY

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**