

L19000215083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

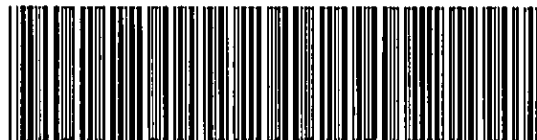
(Business Entity Name)

(Document Number)

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TO: Registration Section  
Division of Corporations

**SUBJECT:** \_\_\_\_\_  
Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

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

Vivian Chou                                  305                  725-4012  
\_\_\_\_\_ at ( \_\_\_\_\_ ) \_\_\_\_\_  
Name of Person                  Area Code                  Daytime Telephone Number

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: Surfaces Southeast, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L19000215083

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

4341 West 108th Street

Hialeah, FL 33018

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

4341 West 108th Street

Hialeah, FL 33018

**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: \_\_\_\_\_

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: Gustavo Herrero, Treasurer and VP of Accounting

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

Albert Claramonte, AMBR

Typed or printed name of signature

Filing Fee: **\$25.00**

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