

L20000097596

(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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C. GOLDEN
OCT - 9 2020

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PAROMOUNT 4204, LLC

Signature _____

Requested by: SETH

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PARAMOUNT 4204, 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:

Liliana V. Avellan, Esq.

Name of Person

Liliana V. Avellan, P.A.

Firm/Company

9950 SW 107 Avenue, Ste 204

Address

Miami FL 33176

City/State and Zip Code

LA@LAPALAW.COM

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

For further information concerning this matter, please call:

LILIANA V AVELLAN

305

271-3760

Name of Person

at (_____) _____

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

2017 - 02 FEB 17

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: PARAMOUNT 4204, LLC

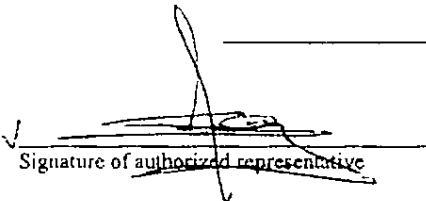
SECOND: The Florida Document Number of the limited liability company is: 120000097596

THIRD: The street address of the limited liability company's principal office is:
3971 SW 8th Street, Suite 305
Miami FL 33134

The mailing address of the limited liability company's principal office is:
3971 SW 8th Street, Suite 305
Miami FL 33134

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: Enrique Aguayo Barrera, including but not limited to execute loan and closing documents to effectuate purchase of real estate property
 - b. No authority granted to: _____

✓ 
Signature of authorized representative

ENRIQUE AGUAYO DE ALBA
Typed or printed name of signature

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