

L20000128672

(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: Sur Express trucking 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:

Delfino Sierra Vasquez  
Name of Person

Sur Express trucking LLC  
Firm/Company

3670 NW 24th Ave  
Address

okeechobee fl 34972  
City/State and Zip Code

Sur Express trucking@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Delfino Sierra Vasquez at ( 863 ) 801-4647  
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: SUR Express trucking LLC.

SECOND: The Florida Document Number of the limited liability company is: L20000128672

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

3670 NW 24th Ave  
Okeechobee Fl 34972

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

Same as above

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: Jennifer Soto

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

Delfino Sierra v.  
Signature of authorized representative

Delfino Sierra v.  
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)