

h21 0000030328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

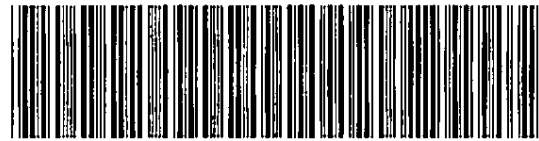
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FREEDOM CAPITAL 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:

OMER REINER

Name of Person

FREEDOM CAPITAL LLC

Firm/Company

101 N.E. 3RD AVENUE SUITE 1500

Address

FT. LAUDERDALE, FL 33301

City/State and Zip Code

Omer@floridacashhomebuyers.com

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

For further information concerning this matter, please call:

OMER REINER

954 684-8487
at ()

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: FREEDOM CAPITAL LLC

SECOND: The Florida Document Number of the limited liability company is: L21000030328

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

101 N.E. 3RD AVENUE

SUITE 1500

FT. LAUDERDALE, FL 33301

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

101 N.E. 3RD AVENUE

SUITE 1500

FT. LAUDERDALE, FL 33301

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: Gustavo de Zendegui, Esq.

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 de Zendegui, Esq.

b. No authority granted to: _____



Signature of authorized representative

OMER REINER

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)