

L21000057677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

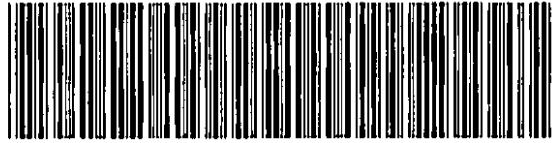
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAY 18 AM 7:46
TALLAHASSEE

D. BRUCE
MAY 19 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D. Janae Beauty 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:

Danielle Rose

Name of Person

D. Janae Beauty LLC

Firm/Company

1576 Woodwind Ct.

Address

Fort Myers FL 33919

City/State and Zip Code

djanaebeautyllc@gmail.com

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

For further information concerning this matter, please call:

Danielle Rose

Name of Person

at (360)

Area Code

931-7999

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

2021 MAR 18 AM 7:46

TALLAHASSEE

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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: D. Janae Beauty LLC.

SECOND: The Florida Document Number of the limited liability company is: L21000057677

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

1576 Woodward Ct
Fort Myers FL 33919

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

1576 Woodward Ct
Fort Myers FL 33919

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.

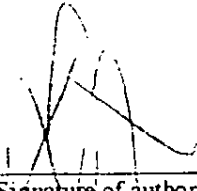
a. Granted to: Danielle Rose

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: Danielle Rose

b. No authority granted to: _____


Signature of authorized representative

Danielle Rose
Typed or printed name of signature

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