

L21 000 170 786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

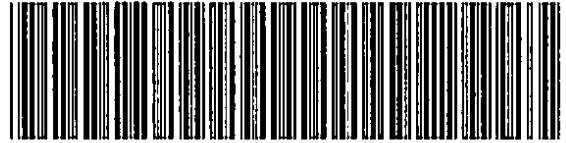
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

2022 AUG -9 AM 8:24

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Luxmen Transportation 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:

Ricardo R. Oliveira

Name of Person

Luxmen Transportation Llc

Firm/Company

5450 Bruce B Downs Blvd PMB #146

Address

Wesley Chapel, FL 33544

City/State and Zip Code

luxmenep@gmail.com

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

For further information concerning this matter, please call:

Ricardo R. Oliveira

Name of Person

at (219)

Area Code

713 1693

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: Luxmen Transportation LLC

SECOND: The Florida Document Number of the limited liability company is: L2100017086

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

5450 Bruce B Downs Blvd
PMB #146
Wesley Chapel, FL 33544

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

PMB #146, 5450 Bruce B. Downs Blvd,
Wesley Chapel FL 33544

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.

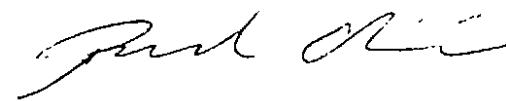
a. Granted to: Ricardo R. Oliveira

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: Ricardo R. Oliveira

b. No authority granted to: _____


Signature of authorized representative

Ricardo Oliveira
Typed or printed name of signature

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