121000254589

(December de Marco)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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of 9/21/2022

COVER LETTER

	1026 NE 88th St II LLC		
SUBJECT:			
	Name	e of Limited Liability Co	mpany
Dear Sir or N	Madam:		
The enclosed	d Statement of Authority and feet	(s) are submitted for filing	g.
Please return	all correspondence concerning t	this matter to the following	ng:
Vanessa Le			
	Name of Person		_
Castor Inves	stments, LLC		
	Firm/Company		-
1355 NW 7t	th St. #1011		
	Address		
Miami, FL 3	33125		
	City/State and Zip Code		_
vle@castori	nvestments.com		
E-n	nail address: (to be used for futur	e annual report notificati	on)
For further in	nformation concerning this matte	r, please call:	
Vanessa Le		626	434-6176
	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 authority:	to section 605.0302(1), Florida Statutes, this limited liability company submits the	ne following statement of		
FIRST:	The name of the limited liability company is: 1026 NE 88th St LLC	<u> </u>		
	D: The Florida Document Number of the limited liability company is:			
THIRD:	The street address of the limited liability company's principal office is: 1355 NW 7th St	20:		
	#1011	22.53		
	Miami, FL 33125	. <u>:</u>		
	The mailing address of the limited liability company's principal office is: 1355 NW 7th St	면 명 5		
	#1011	16		
	Miami, FL 33125			
	May execute an instrument transferring real property held in the name of the a. Granted to: Vanessa Le			
	b. No authority granted to:			
	May enter into other transactions on behalf of, or otherwise act for or bind, a. Granted to: Vanessa Le			
	b. No authority granted to:			
Signatur	re of authorized representative The Le Typed or printe	LE as Trustee of Trust Dated 11/17/200 d name of signature		
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	-		

CR2E138 (2/14)