

121 000495073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

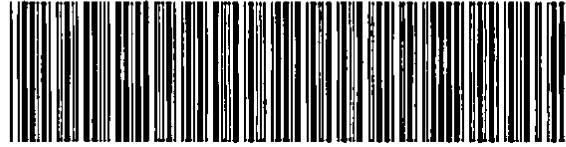
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JA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CA 12 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:

CECILE CANTOS

Name of Person

CA 12 LLC

Firm/Company

19821 NW 2ND AVE SUITE 385

Address

MIAMI GARDENS FL 33169

City/State and Zip Code

FFMSERVICESELLC@GMAIL.COM

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

For further information concerning this matter, please call:

CECILE CANTOS

954

213 7259

Name of Person

at ()

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: CA 12 LLC

SECOND: The Florida Document Number of the limited liability company is: 121000495073

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

19821 NW 2ND AVE SUITE 385

MIAMI GARDENS FL 33169

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

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: CECILE CANTOS

b. No authority granted to: LILIAN CANTOS

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: CECILE CANTOS

b. No authority granted to: LILIAN CANTOS


Signature of authorized representative

CECILE CANTOS

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

Continuance of page 2



Signature of authorized representative

LILIAN CANTOS

Typed or printed name of signature

Signature of authorized representative

Typed or printed name of signature

Signature of authorized representative

Typed or printed name of signature

Signature of authorized representative

Typed or printed name of signature

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