

L22000124312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

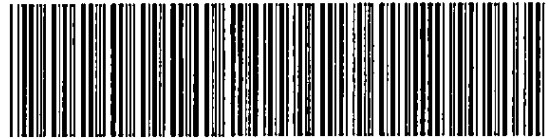
(Business Entity Name)

(Document Number)

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FILED
2023 APR 13 AM 7:27
TALLAHASSEE, FL

6/19/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Incognito One, 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:

Peter J. Pike, Esq.

Name of Person

Pike Law Firm, P.A.

Firm/Company

4901 26th Street West, Suite B

Address

Bradenton, FL 34207

City/State and Zip Code

Peter@PikeRELaw.com

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

For further information concerning this matter, please call:

Peter J. Pike, Esq.

941

at ()

312-2580

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: Incognito One, LLC 2023 APR 13 AM 7:27

SECOND: The Florida Document Number of the limited liability company is: L22000124312

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

3647 Emily Lane, Sarasota, FL 34238

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

3647 Emily Lane, Sarasota, FL 34238

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.

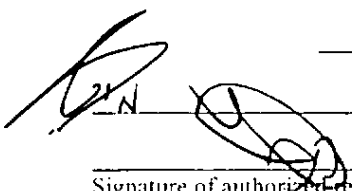
a. Granted to: Keren Mizrahi and/or Michal Kedem, either of whom may act individually.

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: Keren Mizrahi and/or Michal Kedem, either of whom may act individually.

b. No authority granted to: _____


Signature of authorized representative

Michal Kedem

Keren Mizrahi

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)