L22000235852

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S. PRATHE

COVER LETTER

	gistration Section vision of Corporations		r
SUBJECT:	Orange Bird Cleaning LLC		
SUBJECT		mited Liability Comp	pany
Dear Sir or	Madam:		
The enclose	d Statement of Authority and fee(s) are	submitted for filing.	
Please retur	n all correspondence concerning this ma	atter to the following:	
Duane McN	Aahan		
	Name of Person		
Orange Bir	d Cleaning LLC		
	Firm/Company		
13323 SW	31st Ave		
	Address		
Archer, Flo	rida 32618		
	City/State and Zip Code		
duane.obc@	gmail.com		
E-	mail address: (to be used for future annual	ual report notification)
For further	information concerning this matter, plea	ase call:	
Duane Mc!	Mahan	352 at ()	225-6005
	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: Orange Bird Cleaning LLC **SECOND:** The Florida Document Number of the limited liability company is: L22000235852 THIRD: The street address of the limited liability company's principal office is: 13323 SW 31st Ave Archer Florida 32618 The mailing address of the limited liability company's principal office is: 13323 SW 31st Ave Archer Florida 32618 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:__ b. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: _____ b. No authority granted to: Signature of authorized representative Typed or printed name of signature

\$25.00

Certified Copy: \$30.00 (optional)

Filing Fee:

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