

L22000245912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

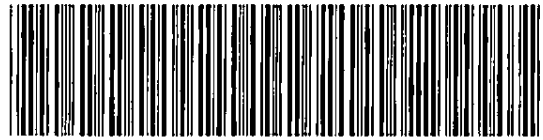
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INMOBILIARIA PALM DRIVE 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:

MANUEL A PAUCAR

Name of Person

Firm/Company

5825 SUNSET DRIVE, SUITE 302

Address

SOUTH MIAMI, FL 33143

City/State and Zip Code

DIEGOIPINCE@GMAIL.COM

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

For further information concerning this matter, please call:

DIEGO IPINCE

954

702-4457

at (_____) _____

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: INMOBILIARIA PALM DRIVE LLC

SECOND: The Florida Document Number of the limited liability company is: 122000245912

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

5825 SUNSET DR. SUITE 302

SOUTH MIAMI, FL 33143

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

SAME AS ABOVE

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: DIEGO IPINCE BRASCHI

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: DIEGO IPINCE BRASCHI

b. No authority granted to: _____


Signature of authorized representative

German Gallo
Typed or printed name of signature

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

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MIAMI