

L22 000 266950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

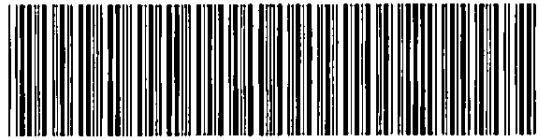
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2023 MAR 27 AM 10:22

SEAL - JURY OF STATE
TALLAHASSEE, FL

[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tokumais 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:

Jeremy Tudor
Name of Person

Tokumais LLC
Firm/Company

800 Kanner Dr Apt B
Address

Fort Pierce FL 34982
City/State and Zip Code

jeremytudor15@icloud.com
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeremy Tudor at (561) 856 2257
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

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CLERK OF COURT
TALLAHASSEE, FL

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: Tokumels LLL

SECOND: The Florida Document Number of the limited liability company is: 92-0638892

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

800 Kanner Dr Apt B Fort Pierce
FL 34982

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

800 Kanner Dr Apt B Fort Pierce
FL 34982

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status 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: Crosby Lebesko

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: Crosby Lebesko

b. No authority granted to: _____


Signature of authorized representative

Jeremy Tucker
Typed or printed name of signature

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

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TALLAHASSEE, FL