

L23000065615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

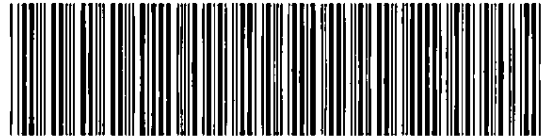
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SECRETARY OF STATE
TALLAHASSEE, FL

Me

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAN ANN AUTO SALES 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:

PATRICK ROBINSON

Name of Person

SAN ANN AUTO SALES LLC

Firm/Company

12708 TRADITION DRIVE

Address

DADE CITY FLORIDA 33525

City/State and Zip Code

MUSTANG6374@YAHOO.COM

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

For further information concerning this matter, please call:

PATRICK ROBINSON

386

2377150

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

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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: SAN ANN AUTO SALES LLC

SECOND: The Florida Document Number of the limited liability company is: L23000065615

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

12620 CURLEY ST SUITE 102

SAN ANTONIO, FLORIDA 33576

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

12620 CURLEY ST SUITE 102

SAN ANTONIO, FLORIDA 33576

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 designated person on the following:

1. May execute an instrument transferring real property held in the name of the company.


a. Granted to: N/A

b. No authority granted to: JEREMY MOORE

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

a. Granted to: JEREMY MOORE

b. No authority granted to: N/A


Signature of authorized representative

PATRICK ROBINSON

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

SECRETARY OF STATE
TALLAHASSEE, FL

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