

L23600171774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

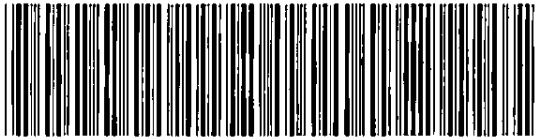
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TALITHA J. HARRIS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DA Bohemian BAZAAR 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:

Marko Darrington  
Name of Person

DA Bohemian BAZAAR  
Firm/Company

100 SW 10th St #301  
Address

Miami, FL 33130  
City/State and Zip Code

mdarrington@da-bohemian-bazaar.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marko Darrington at ( 305 ) 799 5666  
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:

Da Bohemian BAZAR LLC

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

L23000171774

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

100 SW 10th St #301

Miami, FL 33130

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

100 SW 10th St #301

Miami, FL 33130

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:

MARLO DARRINGTON


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:

MARLO DARRINGTON

b. No authority granted to:

  
Signature of authorized representative

MARLO DARRINGTON  
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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