

L23000341153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

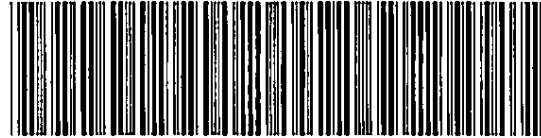
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DATE: 09/07/2023

NAME: GOK CONSUTING LLC

TYPE OF FILING: STATEMENT OF AUTHORITY

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

GOK CONSULTING LLC

SUBJECT: _____
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:

MARC LABOWITZ

Name of Person

GOK CONSULTING LLC

Firm/Company

4581 WESTON RD #160

Address

WESTON, FL 33331

City/State and Zip Code

rebekah@taocenter.net

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

For further information concerning this matter, please call:

Rebekah Dickinson

404

2174331

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: GOK CONSULTING LLC

SECOND: The Florida Document Number of the limited liability company is: L23000341153

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

4581 WESTON ROAD

#160

WESTON, FL 33331

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

4581 WESTON ROAD

#160

WESTON, FL 33331

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: MARC LABOWITZ, as Manager

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: MARC LABOWITZ, as Manager

b. No authority granted to: _____

Marc Labowitz
Signature of authorized representative

MARC LABOWITZ,
Typed or printed name of signature

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

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