

L23 000 341 716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

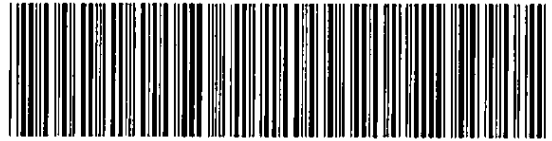
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2024 FEB 16 PM 2:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Filoland LLC, a Florida Limited Liability Company  
\_\_\_\_\_  
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:

Cyndi Collins

\_\_\_\_\_  
Name of Person

Fidelity National Title of Florida, Inc.

\_\_\_\_\_  
Firm/Company

2310 E Robinson Street

\_\_\_\_\_  
Address

Orlando, FL 32803

\_\_\_\_\_  
City/State and Zip Code

cyndi.collins@fnf.com

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

For further information concerning this matter, please call:

Rodrigo Ayala Filomena

689

2339730

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

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: Filoland, LLC a Florida Limited Liability Company

**SECOND:** The Florida Document Number of the limited liability company is: L23000341716

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

4112 Southern Vista Loop

St Cloud, FL 34772

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

4112 Southern Vista Loop

St Cloud, FL 34772

**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.

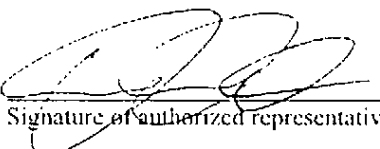
a. Granted to: Rodrigo Ayala Filomena

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: Sabrina Wilhelm Pereira

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

Rodrigo Ayala Filomena

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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SECRET  
FBI