

L9800000 2423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

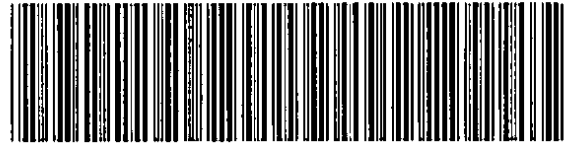
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4356 APARTMENTS, L.C.

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:

Charles A. Guerra

Name of Person

4356 APARTMENTS, L.C.

Firm/Company

7969 NW 2nd Street, #306

Address

Miami, FL 33126

City/State and Zip Code

KMG11000@gmail.com

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

For further information concerning this matter, please call:

CHARLES A. GUERRA at (305) 297-0518
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: 4356 APARTMENTS, L.C.

SECOND: The Florida Document Number of the limited liability company is: L98000002423

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

7969 NW 2nd Street

#306

Miami, FL 33126

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

7969 NW 2nd Street

#306

Miami, FL 33126

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.

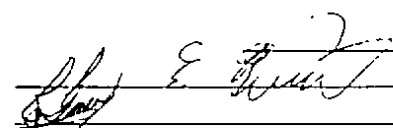
a. Granted to: Charles A. Guerra


b. No authority granted to: _____


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

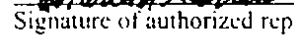
a. Granted to: Charles A. Guerra

b. No authority granted to: _____








Signature of authorized representative

Elsa F. Guerra

Carlos M. Guerra

Alicia E. Guerra

Charles A. Guerra
Typed or printed name of signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA