

L1100000 84354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

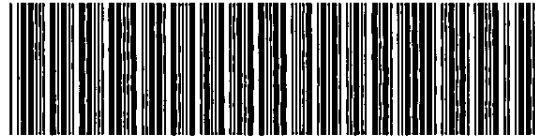
(Business Entity Name)

(Document Number)

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

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MAY 07 2014  
J. BRUCE



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: ASSETS RECOVERY 24, LLC

SECOND: The Florida Document Number of the limited liability company is: L11000084354

THIRD: The street address of the limited liability company's principal office is:  
1900 SUNSET HARBOUR DR. 2ND FL ANNEX  
MIAMI BEACH, FL 33139

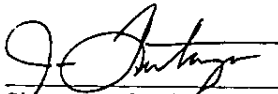
The mailing address of the limited liability company's principal office is:  
1900 SUNSET HARBOUR DR. 2ND FL ANNEX  
MIAMI BEACH, FL 33139

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: JAMES FRATANGELO  
DANIEL COOSEMANS
  - b. No authority granted to: JOHN OLSEN OR JOHN R OLSEN

- 2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
  - a. Granted to: JAMES FRATANGELO  
DANIEL COOSEMANS
  - b. No authority granted to: JOHN OLSEN OR JOHN R OLSEN

FIFTH: This document is to be effective as of January 1, 2014, all other agreements, powers of attorney or documents granting authority to ANY individual(s) are hereby revoked.

  
Signature of authorized representative

JAMES FRATANGELO, MGR  
Typed or printed name of signature

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

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