

L13000073741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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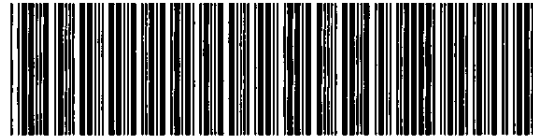
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JEM PROPERTIES #1, 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:

**Devan Mathura**

Name of Person

**JEM Properties #1, LLC**

Firm/Company

**1800 W. Oak Ridge Road, Suite B**

Address

**Orlando, FL 32809**

City/State and Zip Code

**mathura.holdings@gmail.com**

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

For further information concerning this matter, please call:

**Devan Mathura**

Name of Person

**407**

Area Code

**217-5704**

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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**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: JEM Properties #1, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L13000073741

**THIRD:** The street address of the limited liability company's principal office is:  
3909 White Heron Drive  
Orlando, FL 32808

The mailing address of the limited liability company's principal office is:  
1800 W. Oak Ridge Road  
Suite B  
Orlando, FL 32809

**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: Devan Mathura  
Charlene Mathura

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: Devan Mathura  
Charlene Mathura

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

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TALLAHASSEE, FLORIDA  
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Devan Mathura  
Signature of authorized representative

DEVAN MATHURA  
Typed or printed name of signature

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