

L13000075547

(Requestor's Name)

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WALK IN

PICK UP: 7/10 GLINDA

- CERTIFIED COPY _____
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- CUS _____
- FILING LLC STATEMENT OF AUTHORITY

1. JEN FLORIDA XV, LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

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TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JEN Florida XV, 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:

Grant T. Downing, Esq.

Name of Person

Godbold, Downing & Bill, P.A.

Firm/Company

222 W. Comstock Avenue, Suite 101

Address

Winter Park, FL 32789

City/State and Zip Code

khoran@gdb-law.com

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

For further information concerning this matter, please call:

Kristy Horan

Name of Person

407

Area Code

647-4418

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CR2E138 (2/14)

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: JEN Florida XV, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000075547

THIRD: The street address of the limited liability company's principal office is:
1750 W. Broadway
Suite 111
Oviedo, FL 32765

The mailing address of the limited liability company's principal office is:
1750 W. Broadway
Suite 111
Oviedo, FL 32765

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: Sun Terra Communities I, LLC, and to Richard A Jerman and John Kraynick, Co-Managing Members

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: Sun Terra Communities I, LLC, and to Richard A. Jerman and John Kraynick, Co-Managing Members

b. No authority granted to: _____

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Signature of authorized representative

*See attached Signature Page

Typed or printed name of signature

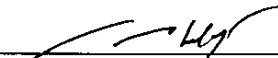
Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

Signature Page
To
Statement of Authority

JEN FLORIDA XV, LLC,
a Florida limited liability company

BY: JEN IV Florida Value Add, LLC,
a Florida limited liability company, its Co-Manager


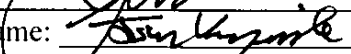
By: JEN IV GP LLC, a Delaware limited
liability company, its manager

By: 
Print Name: Reuben Leibowitz
Its: President

By: Sun Terra Communities I, LLC,
a Florida limited liability company,
its Non-Member Co-Manager

By: 
Print Name: 
Its: Co-Managing Member

BY: Sun Terra Communities I, LLC,
a Florida limited liability company,
its Non-Member Co-Manager

By: 
Print Name: 
Its: Co-Managing Member

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