

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REAL OPTIONS AND INVESTMENTS LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Francis Joseph Heron III

Name of Person

REAL OPTIONS AND INVESTMENTS LLC

Firm/Company

5208 Assisi Ave

Address

Ave Maria, FL 34142

City/State and Zip Code

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

For further information concerning this matter, please call:

Francis Joseph Heron, III at (954) 829-1076
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: REAL OPTIONS AND INVESTMENTS LLC

2023 APR 13 AM 7:32

SECOND: The Florida Document Number of the limited liability company is: L13000127545

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

5208 Assisi Ave
Ave Maria, FL 34142

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

5208 Assisi Ave
Ave Maria, FL 34142

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: Francis Joseph Heron, III or Jazmin C. Heron

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: Francis Joseph Heron, III or Jazmin C. Heron

b. No authority granted to:

Handwritten signature of Francis Joseph Heron, III

Signature of authorized representative

Francis Joseph Heron, III
Typed or printed name of signature

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