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2015 FEB 18 PH 2: 55

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STATEMENT OF AUTHORITY

Pursuant to section 60:	5.0302(1), Florida S	tatutes, this limite	d liability company	submits the follow	ing statement of
authority:					

FIRST:	The name o	of the limited liability company is: 607 Somerset of MI, LL	<u>c</u>	-
SECON	D: The Flor	rida Document Number of the limited liability company is:		
THIRD		address of the limited liability company's principal office is: Collier Boulevard		
	_Marco	Island, FL 34145		
		ng address of the limited liability company's principal office is: w Road		
	Briar	Cliff Manor, NY 10510		
position		tement of authority grants or sets limitations of authority on all persons having in a company, whether as a member, transferce, manager, officer or otherwise ing:		
	1. May ex	secute an instrument transferring real property held in the name of the company	/.	
	a.	Granted to: Christopher Fenimore or Michelle F	emimore FEB	
	b.	No authority granted to:	18 PI	
	2. May er	nter into other transactions on behalf of, or otherwise act for or bind, the compa	2: 55 STATE STATE	
		Granted to Christopher Fenimore or Michelle F	-	
	b.	No authority granted to:		
(h	Marin.	Christopher Fen	imore	

Signature of authorized representative

Typed or printed name of signature

Filing Fee:

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

CR2E138 (2/14)