

L15000114282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

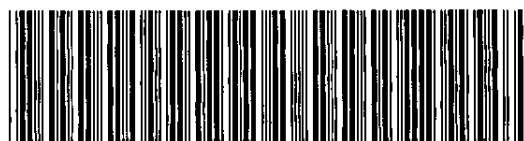
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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**CORPORATE
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236 East 6th Avenue, Tallahassee, Florida 32303

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LLC

1. Saguaro Florida 4 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 #)

SPECIAL INSTRUCTIONS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAGUARO FLORIDA 4 LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fec(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

at (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

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: SAGUARO FLORIDA 4 LLC

SECOND: The Florida Document Number of the limited liability company is: LS 000 114282

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: Richard A Jerman and/or John Kraynick, each in
their respective capacities as company Vice Presidents

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: Richard A. Jerman and/or John Kraynick, each
in their capacities as company Vice Presidents

b. No authority granted to: _____

SLV Manager LLC, a Delaware limited liability company
Manager of Saguro Florida 4 LLC

By: _____

Signature of authorized representative

ETHAN WEDDOWITZ

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2B138 (2/14)

FILED
15 JUL 10 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA