

L220000165869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

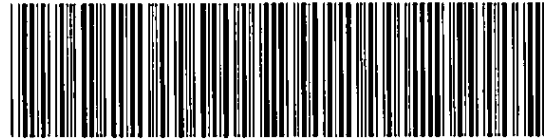
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800384271938

Statement of Authority

04/20/22--01003--017 **210.00

FILED

2022 APR 20 AM 10:17

OFFICE OF STATE
CORPORATION
TALLAHASSEE, FLORIDA

RECEIVED

2022 APR 20 AM 11:37

OFFICE OF STATE
CORPORATION
TALLAHASSEE, FLORIDA

A. RAMSEY
APR 21 2022

**CORPORATE
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236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 04/20/2022

- CERTIFIED COPY** _____
- PHOTOCOPY** _____
- CUS** _____
- FILING** STATEMENT OF AUTHORITY

1. Cassel Park, 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: Cassel Park, 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:

Kristy Horan

Name of Person

Godbold, Downing, Bill & Rentz, 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

at (407) 647-4418

Name of Person

Area Code

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

FILED

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority: 2022 APR 20 AM 10:17

FIRST: The name of the limited liability company is: Cassel Park, LLC SECRETARY OF STATE
TALLAHASSEE, FL 32399

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

THIRD: The street address of the limited liability company's principal office is:
800 S. Orlando Avenue
2nd Floor
Maitland, FL 32751

The mailing address of the limited liability company's principal office is:
800 S. Orlando Avenue
2nd Floor
Maitland, FL 32751

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: Michael Grindstaff and/or Steve Griggs, each in
their respective capacity as Manager

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: Michael Grindstaff and/or Steve Griggs, each in
in their capacity as Manager

b. No authority granted to: _____



Signature of authorized representative

Michael Grindstaff

Typed or printed name of signature

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