

**L04000078152**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

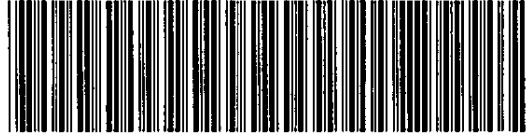
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**200274845812**

07/10/15--01013--025 \*\*25.00

**FILED**

**2015 JUL 10 A 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**JUL 13 2015  
OFFICE**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Aegean Properties 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:

Timothy M. Hartley, Esq.

\_\_\_\_\_  
Name of Person

Hartley Law Offices, PLC

\_\_\_\_\_  
Firm/Company

800 SE Third Avenue, Fourth Floor

\_\_\_\_\_  
Address

Fort Lauderdale, Florida 33316

\_\_\_\_\_  
City/State and Zip Code

hartley@hartleylaw.net

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

For further information concerning this matter, please call:

Timothy M. Hartley, Esq.

\_\_\_\_\_  
Name of Person

954  
at ( )

\_\_\_\_\_  
Area Code

357-9973

\_\_\_\_\_  
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

2015 JUL 10 A 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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: Aegean Properties LLC

**SECOND:** The Florida Document Number of the limited liability company is: L04000078152

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

3020 NE 32ND AVENUE

SUITE #326

FT. LAUDERDALE, FL 33308

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

3020 NE 32ND AVENUE

SUITE 326

FT. LAUDERDALE, FL 33308

**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:

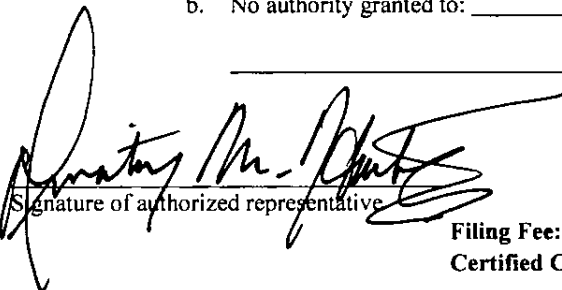
a. Granted to: ANDRE STACHEWITSCH

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: ANDRE STACHEWITSCH

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

Timothy M. Hartley, Esq.

Typed or printed name of signature

Filing Fee: **\$25.00**

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

FILED  
2015 JUN 10 A 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA