

L000000011848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

OCT 26 2015

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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: MARISHA, L.L.C.

SECOND: The Florida Document Number of the limited liability company is: L00000011848

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

1245 Court Street, Suite 102

Clearwater, FL 33756

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

1245 Court Street, Suite 102

Clearwater, FL 33756

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; may give a mortgage on real property held in the name of the company; may satisfy a mortgage on real property held in the name of the company; may record a lease, option, and/or mechanics lien on real property held in the name of the company; may record any other incumbrance which would cloud or otherwise provide a detrimental impact on the real property held in the name of the company.
 - a. Granted to: JOSEPH E. ROCKLEIN, III, CPA and Gassman, Crotty & Denicolo, P.A.
 - b. No person or entity other than the person(s) or entity(ies) listed under Item 1(a) above, including no member, manager, transferee or otherwise of MARISHA, L.L.C., shall have any authority to take any of the actions set forth in Item 1 above. The authority to take any of the actions set forth in Item 1 above is limited solely to the person(s) or entity(ies) listed under Item 1(a) above.

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Witness

Dayn Young

Witness

Christina Witting

Signature of Authorized Representative

[Signature]

Alan S. Gassman, Esquire

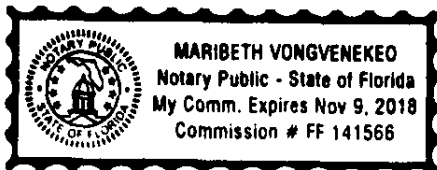
Typed or printed name of signature

STATE OF FLORIDA)
COUNTY OF PINELLAS)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared ALAN S. GASSMAN, ESQUIRE, known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed this Deed, or that I relied upon the following forms of identification of the above-named person: _____.

WITNESS, my official hand and seal this 21st day of October, 2015.

(SEAL)



Notary Public Signature

Maribeth Vongvenekoo

Printed Notary Signature

Maribeth Vongvenekoo

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