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(Re	questor's Name)					
(Ad	ldress)					
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· (Cit	ty/State/Zip/Phone	#)				
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PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
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S Warren JUN 1 7 2016

COVER LETTER

Registration Section , Division of Corporations

TO:

SUBJECT:	TANET MAI	NAGEMENT L	LC				
SUBJECT.	Name of Limited Liability Company						
Dear Sir or M	adam:						
The enclosed	Statement of Autho	rity and fee(s) are	submitt	ed for fili	ıg.		
Please return	all correspondence	concerning this m	atter to t	he followi	ng:		
SAUNDRA I	OURRENCE At	corney at	Law				
	Name of	Person					
	Firm/Co	mpany			-		
4701 NW	82nd Court						
	Addre	SS					
Ocala, F	L 34482						
1121313131	City/State and 2	Zip Code					
trevorne	tte@aol.com						
E-m	ail address: (to be u	sed for future ann	ual repo	rt notificat	tion)		
For further in	formation concerning	g this matter, ple	ase call:				
Sandy Du	rrence		at (352)	598-2600 Daytime Telephone Number	
	Name of Person	1		Area Cod	le	Daytime Telephone Number	
STR	EET/COURIER A	DDRFSS:		MAII	JNC	G ADDRESS:	
Regi	stration Section		Registration Section				
	sion of Corporation	3	Division of Corporations				
	on Building Executive Center (Circle	P.O. Box 6327 Tallahassee, Florida 32314				

Tallahassee, Florida 32301

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:	LLC						
SECOND: The Florida Document Number of the limited liability company is:	00000012629						
THIRD: The street address of the limited liability company's principal office is:							
8961 Conference Drive							
Suite 1	23						
Fort Myers, FL 33919	ART IE						
The mailing address of the limited liability company's principal office is: P.O. Box 572	ARY OF S						
Sanibel Island, FL 33957	12: 08 1AIE 0RIDA						
1. May execute an instrument transferring real property held in the name of a. Granted to:	f the company.						
b. No authority granted to:							
a. Granted to:	nd, the company.						
b. No authority granted to:							
Signature of authorized representative Typed or pri	bo Nette inted name of signature						

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)