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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Name)	
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Certified Copies	_ Certificates of	Status
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Special Instructions to	Filing Officer:	
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J. HARRIS

COVER LETTER

	Division of Corporations					
SHBIRC	CIU GLADIOLUS LAND GR	OUP, LLC				
SUBJECT: Name of Limited Liability Company						
Dear Sir o	or Madam:					
The enclo	sed Statement of Authority and fee(s) are	submitted for filing.				
Please ret	urn all correspondence concerning this ma	atter to the following:				
Jay A.	Brett					
	Name of Person					
Sheppa	ard, Brett, Stewart, Hersch, Kins	sey & Hill, P.A.				
	Firm/Company					
9100 C	ollege Pointe Court					
	Address					
Fort My	yers, FL 33919					
	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·				
iraz58@	@aol.com					
	E-mail address: (to be used for future ann	ual report notification	1)			
For furthe	er information concerning this matter, plea	ase call:				
Jay A.	Brett	239	334-1141			
	Name of Person	Area Code	Daytime Telephone Number			
	TREET/COURIED ADDRESS.	M . W IN	C ADDRESS.			
	STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section				
I	Division of Corporations	Division of Corporations				
	Clifton Building 2661 Executive Center Circle	P.O. Box 6327				
2	TOOT EXECUTIVE CENTER CITCLE	Tallahassee, Florida 32314				

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

Pursuant authority	to section 605.0302(1), Florida Statutes, this limited liability company submits the following:	ng stateme	ent of	
FIRST:	The name of the limited liability company is: CIU Gladiolus Land Group, LLC			-
SECON	D: The Florida Document Number of the limited liability company is:			_
THIRD	The street address of the limited liability company's principal office is: 7451 Gladiolus Drive, Fort Myers, FL 33908			
	The mailing address of the limited liability company's principal office is: 7451 Gladiolus Dr., Suite A, Fort Myers, FL 33908			
	H: This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise of the company of t			
	n the following:	-		
	May execute an instrument transferring real property held in the name of the company a. Granted to: Brian N. Schwartz or Ira Zucker	`.		
	b. No authority granted to:			
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the compa a. Granted to: Brian N. Schwartz or Ira Zucker	iny T. S.	15 JUL 10	
	b. No authority granted to:	N SIATE NETORDA	PM 2: 11	Ö
<u>~~</u>	Ira Zucker			
Signatur	e of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	signature		