*L01000014506

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K.SALY EXAMINER JUN 17 2015

COVER LETTER

TO: Registration Section Division of Corporations
LAUREL STREET INVESTMENTS, L.L.C.
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:
CHARLES R. WOOD
Name of Person
LAUREL STREET INVESTMENTS, L.L.C.
Firm/Company
12428 SAN JOSE BLVD., SUITE 1
Address
JACKSONVILLE, FL 32223
City/State and Zip Code
CHARLES.WOOD@ATTORNEYSTITLESERVICES.US
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CHARLES R. WOOD 904 347-8685
Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Pagistration Section Pagistration Section Pagistration Section

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E138 (2/14)

STATEMENT OF AUTHORITY

	of the limited liability company is: LAUREL STREET INVESTMENTS, L.L.C.
ECOND: The F	orida Document Number of the limited liability company is: L01000014506
HIRD: The stree	
MIAMI,	FL 33156
	ing address of the limited liability company's principal office is: OUTH DADELAND BLVD., 4TH FLOOR ing address of the limited liability company's principal office is: OUTH DADELAND BLVD., 4TH FLOOR
MIAMI,	FL 33156
osition of a perso erson on the follo	atement of authority grants or sets limitations of authority on all persons having the status or in a company, whether as a member, transferee, manager, officer or otherwise or to a specifiving: xecute an instrument transferring real property held in the name of the company.
\$	CHARLES R. WOOD
ł	Granted to: CHARLES R. WOOD
ł	No authority granted to:
l 2. May	Mo authority granted to:

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)