

L03 000008005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

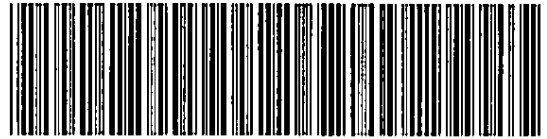
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOON BEAM 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:

ALAN GRASSANO
Name of Person

GRASSANO MANAGEMENT INC
Firm/Company

127 SPRINGLINE DR
Address

VERO BEACH FL 32963
City/State and Zip Code

AGRASSANO@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALAN GRASSANO at (772) 231-2460
Name of Person Area Code Daytime Telephone Number

Mailing Address:

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



Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: MOON BEAM LLC

SECOND: The Florida Document Number of the limited liability company is: LO3000008005

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

127 Springline Dr
VERO BEACH, FL 32963

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

SAME

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CLERK OF CIRCUIT COURT
PALM BEACH COUNTY, FLORIDA

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.

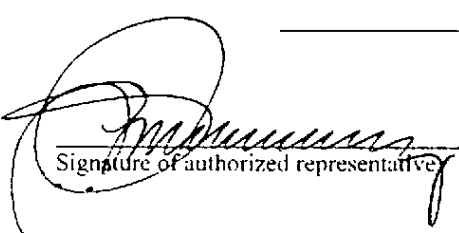
a. Granted to: VALERIE GRASSANO
AS MANAGER OF LLC

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: VALERIE GRASSANO
AS MANAGER OF LLC

b. No authority granted to: _____


Signature of authorized representative

ALAN GRASSANO MGR
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)