1030000

49438

(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400346086004

06/22/28--01003--024 **25.00

RECEIVED

JUN 19 2020

50 JUN 19 ANTI: 45

rational do

COVER LETTER

TO: Registration Section	
Division of Corporations :	
Belleair Partners, 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:	
Comp Hhat Had	
Gary Ubaldini	
Name of Person	
Belleair Partners, LLC	
Firm/Company	
30522 US Hwy 19N Suite 105	
Address	
Palm Harbor, FL 34684	2
City/State and Zip Code	20 JUN
garyu@kw.com	19
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	VHII: 42
Gary Ubaldini 727 772-5600 x25	<u>៏</u> ភ
at ()	umber

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 liabiliauthority: FIRST: The name of the limited liability company is: Belleair Par		
SECOND: The Florida Document Number of the limited liability of	L03000049438 company is:	
THIRD: The street address of the limited liability company's princ 801 West Bay Drive	cipal office is:	
Suite 200		
Largo, FL 33770		
The mailing address of the limited liability company's pr	incipal office is:	
Suite 105		
Palm Harbor, FL 34684		
position of a person in a company, whether as a member, transferce, person on the following: 1. May execute an instrument transferring real property h a. Granted to:	eld in the name of the company.	20 JUN 19
b. No authority granted to: Howard Weinstein		AHII: 45
May enter into other transactions on behalf of, or other a. Granted to:	• •	
b. No authority granted to: Howard Weinstein		
Jan Wale	Gary Ubaldini	
Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00		E