

LO300054310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

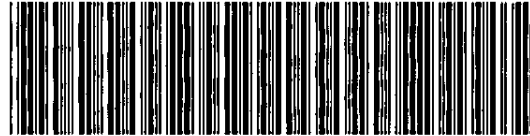
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 20 2015

R. WHITE

15 MAR 31 PM 2:44
TALLAHASSEE, FLORIDA

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: SUNVEST RESORTS, LLC

SECOND: The Florida Document Number of the limited liability company is: L03000054310

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

4090 Enchanted Oaks Circle

Kissimmee, FL 34741

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

4090 Enchanted Oaks Circle

Kissimmee, FL 34741

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.

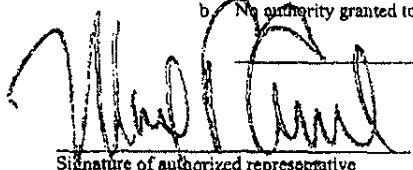
a. Granted to: Max P. Cawal or Bennet Grutman

b. No authority granted to: _____

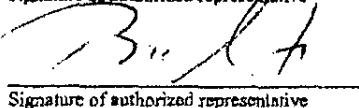
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Max P. Cawal or Bennet Grutman

b. No authority granted to: _____


Signature of authorized representative

Signature of authorized representative


Signature of authorized representative

Signature of authorized representative

Max P. Cawal
Typed or printed name of signature

Bennet Grutman
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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