

L04000031039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

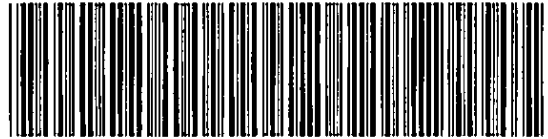
(Business Entity Name)

(Document Number)

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FILED
MAR 30 2021
PM 3:58
FBI - JEFFERSON

JUN 10 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRIMSON HORIZONS, 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:

KRISS HAMMOND

Name of Person

CONSULTING PARTNERS NETWORK, INC.

Firm/Company

1935 COMMERCE LANE, SUITE 6

Address

JUPITER, FL 33458

City/State and Zip Code

KHAMMOND@CPNETWORKINC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KRISS HAMMOND

Name of Person

at (561)

Area Code

262-5678

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: CRIMSON HORIZONS, LLC

SECOND: The Florida Document Number of the limited liability company is: L04000031039

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

685 ROYAL PALM BEACH BLVD
SUITE 205
ROYAL PALM BEACH, FL 33411

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

685 ROYAL PALM BEACH BLVD
SUITE 205
ROYAL PALM BEACH, FL 33411

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: KRISS HAMMOND

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: KRISS HAMMOND

b. No authority granted to: _____

Barbel Abela
Signature of authorized representative

BARBEL ABELA
Typed or printed name of signature

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