- L040000 97017

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COVER LETTER

	vision of Corporations		·
SUBJECT	382-386 ST ARMANDS CIRC	LE LLC	
SOBJECT		ited Liability Comp	pany
Dear Sir or	Madam:		
The enclose	ed Statement of Authority and fee(s) are su	bmitted for filing.	
Please retur	rn all correspondence concerning this matte	er to the following:	
ADAM S	SELIGMAN, ESQ.		
	Name of Person		
WARD [DAMON		
	Firm/Company		
4420 BE	EACON CIRCLE		
	Address		
WEST F	PALM BEACH, FLORIDA 33407		
	City/State and Zip Code		
ASELIG	MAN@WARDDAMON.COM		
E	-mail address: (to be used for future annua	l report notification	n)
For further	information concerning this matter, please	call:	
ADAM S	SELIGMAN	561	842-3000
	Name of Person	Area Code	Daytime Telephone Number
Re Di Cl 26	FREET/COURIER ADDRESS: egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	Registrati Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 see, Florida 32314

STATEMENT OF AUTHORITY

authority:	section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of
FIRST: Th	ne name of the limited liability company is: 382-386 ST ARMANDS CIRCLE LLC
SECOND:	The Florida Document Number of the limited liability company is: L0400093087
THIRD: T	the street address of the limited liability company's principal office is: LAGOMAR ROAD PALM BEACH, FL 33480
	The mailing address of the limited liability company's principal office is: LAGOMAR ROAD PALM BEACH, FL 33480
position of a	This statement of authority grants or sets limitations of authority on all persons having the status or a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific he following: May execute an instrument transferring real property held in the name of the company. a. Granted to: N/A
	b. No authority granted to: sell,mortgage or encumber properties
2.	May enter into other transactions on behalf of, or otherwise act for or bind, the company a. Granted to: D. GLEN ALEXANDER (leases, utilities, repair agreements and related matters)
\	b. No authority granted to: sell,mortgage or encumber properties MATHIEU ROSINSKY
Signature of	f authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)