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COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	382-386 ST ARMANDS CIRCLE LLC	
	Name of Limited Liability Company	
Dear Si	r or Madam:	
The end	closed Statement of Authority and fee(s) are submitted for filing.	
Please r	return all correspondence concerning this matter to the following:	
ADAN	M SELIGMAN, ESQ.	
	Name of Person	
WAR	D DAMON	
	Firm/Company	
4420	BEACON CIRCLE	
	Address	
WES	T PALM BEACH, FLORIDA 33407	
	City/State and Zip Code	
ASEL	IGMAN@WARDDAMON.COM	
	E-mail address: (to be used for future annual report notification)	#35V

STREET/COURIER ADDRESS:

Name of Person

For further information concerning this matter, please call:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Daytime Telephone Number

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

CR2E138 (2/14)

ADAM SELIGMAN

STATEMENT OF AUTHORITY

authority	t to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of v:
FIRST:	The name of the limited liability company is: 382-386 ST ARMANDS CIRCLE LLC
SECON	D: The Florida Document Number of the limited liability company is:
THIRD:	: The street address of the limited liability company's principal office is: C/O BELMONT ASSOCIATES LLC
	777 E. ATLANTIC AVENUE, SUITE 301
	DELRAY BEACH, FL 33483
	The mailing address of the limited liability company's principal office is: C/O BELMONT ASSOCIATES LLC
	777 E. ATLANTIC AVENUE, SUITE 301
	DELRAY BEACH, FL 33483
person of	of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific on the following: 1. 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: KYLIE JACKSON
	(leases, utilities, repair agreements and related matters)
	b. No authority granted to: sell, mortgage or encumber properties
Signature	re of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)