

LD5000018218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

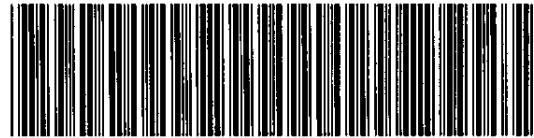
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2017 APR 17 PM 4:09
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TALLAHASSEE, FLORIDA

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FILED
17 APR 17 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren
APR 18 2017



VIA First Class U.S. Mail
Addressed As Below

April 11, 2017

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

RE: Statement of Authority
SR-1 Investments, LLC
Document L05000018218

Dear Deputy Clerk:

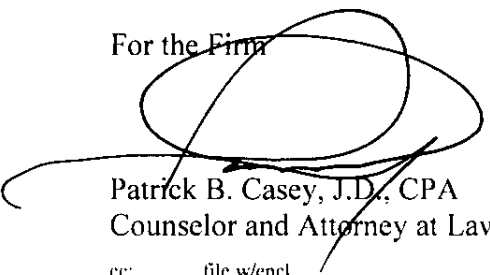
Enclosed in the following:

- Your standard cover letter re: Statement of Authority;
- Statement of Authority on behalf of SR-1 Investments; and
- Check payable to the Division of Corporations

Please cause the Statement of Authority to be recorded in the public records of the Division.

Sincerely,

For the Firm



Patrick B. Casey, J.D., CPA
Counselor and Attorney at Law

cc: file w/encl
encl As Stated
Document2

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SR-1 Investments, 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:

Patrick B. Casey, J.D., CPA

Name of Person

Casey Law Group, P.L.

Firm/Company

P.O. Box 2527

Address

Bonita Springs, FL 34133

City/State and Zip Code

patrick@caseylawoffice.com

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

For further information concerning this matter, please call:

Patrick B. Casey

Name of Person

239

Area Code

498-6999

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

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: SR-1 Investments, LLC

SECOND: The Florida Document Number of the limited liability company is: L05000018218

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

1509 Railhead Boulevard

Naples, FL 34110

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

same as above

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: Mandy S. Romanelli, Manager

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: Mandy S. Romanelli, Manager

b. No authority granted to: _____

X Mandy S Romanelli
Signature of authorized representative

Mandy S. Romanelli, Manager

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA