



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000125947 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GARY, DYTRYCH & RYAN, P.A.
Account Number : I19990000255
Phone : (561) 844-3700
Fax Number : (561) 844-2388
01

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HOOD ROAD CENTRE #100 LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

RECEIVED
2017 MAY -8 PM 3:17
TALLAHASSEE, FLORIDA

17 MAY -8 AM 8:46

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MAY 09 2017

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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: HOOD ROAD CENTRE #100 LLC

SECOND: The Florida Document Number of the limited liability company is: Lo5000056236

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

2872 Old Cypress N

Palm Beach Gardens, FL 33410

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

2872 Old Cypress N

Palm Beach Gardens, FL 33410

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.

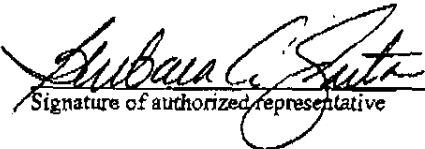
a. Granted to: Barbara A. Gaeta

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: Barbara A. Gaeta

b. No authority granted to: _____


Signature of authorized representative

Barbara A. Gaeta

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)

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Statement of Authority Continued:

Signed, Sealed and Delivered
In the Presence of:

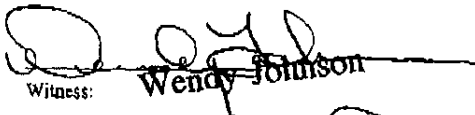
Hood Road Centre #100, LLC, a Florida limited liability company
BY: Louis A. Gaeta, Jr. Non-Exempt Q Tip
Trust, as Manager and Member

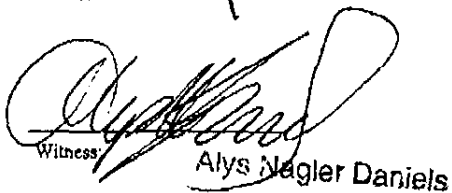
BY: 
Barbara A. Gaeta, Trustee

BY: Credit Shelter Trust of the Neil J. Gaeta
Declaration of Trust dated September 22, 2009,
as Manager and Member

BY: 
Barbara A. Gaeta, Co-Trustee

BY: 
Kristen T. Gaeta, Co-Trustee


Witness: Wendy Johnson


Witness: Alys Nagler Daniels

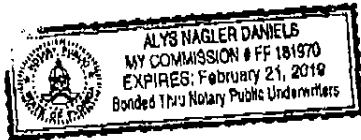
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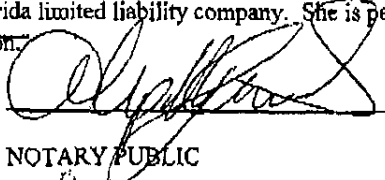
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STATE OF FLORIDA)

COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 8th day of May, 2017, by **Barbara A. Gaeta**, as Trustee of the Louis A. Gaeta, Jr. Non-Exempt Q Tip Trust, as Manager and Member, and **Barbara A. Gaeta** as Co-Trustee of the Credit Shelter Trust of the Neil J. Gaeta Declaration of Trust dated September 22, 2009, as Manager and Member of Hood Road Centre #100 LLC, a Florida limited liability company. She is personally known to me or has produced _____ as identification.




NOTARY PUBLIC

(Name of Notary printed, typed, or stamped)

COMMISSION EXPIRES:

COMMISSION NUMBER:

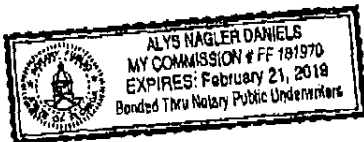
[Notarial Seal]

STATE OF FLORIDA)

)ss.

COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 8th day of May, 2017, by **Kristen T. Gaeta** as Co-Trustee of the Credit Shelter Trust of the Neil J. Gaeta Declaration of Trust dated September 22, 2009, as Manager and Member of Hood Road Centre #100 LLC, a Florida limited liability company. She is personally known to me or has produced _____ as identification.




NOTARY PUBLIC

(Name of Notary printed, typed, or stamped)

COMMISSION EXPIRES:

COMMISSION NUMBER:

[Notarial Seal]

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