

L06000055280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

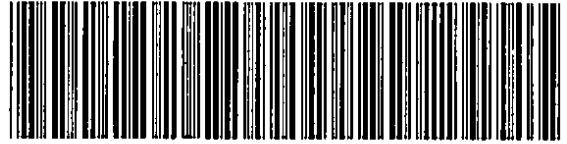
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000330382170

06/10/19--01020--018 **25.00

FILED

19 JUN 10 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 22 2019

T SCHROEDER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: US1 PROPERTIES 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:

Donna Gaither

Name of Person

Timothy P Kelly PA

Firm/Company

1016 LaSalle Street

Address

JACKSONVILLE, FL 32207

City/State and Zip Code

donna@tkellypa.com

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

For further information concerning this matter, please call:

Donna Gaither

904

399-3705

at (_____) _____

Name of Person

Area Code

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: US1 PROPERTIES, LLC

SECOND: The Florida Document Number of the limited liability company is: L06000055280

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

10562 New Kings Road

Jacksonville, FL 32219

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

10562 New Kings Road

Jacksonville, FL 32219

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.

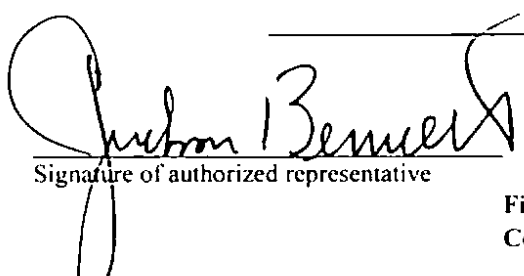
a. Granted to: JUDSON BENNETT, MANAGER

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: JUDSON BENNETT, MANAGER

b. No authority granted to: _____


Signature of authorized representative

Judson Bennett
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 JUN 10 AM 9:36

FILED