

LOL0000 58967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2.300000 FEB 25 2015



223 South Woodland Boulevard, DeLand, Florida 32720
Telephone: 386-734-5766 Fax: 386-736-4557

February 17, 2015

Via Federal Express
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Atlantic Coast LLC Refi
Our File No. 15-012

Dear Sir or Madam:

Enclosed is a Statement of Authority for the above-referenced company, together with Ability Title's escrow check in the amount of \$30.00, representing the filing and certified copy fee.

For your convenience, a self-addressed stamped envelope is enclosed to return the certified copy to our office. Please contact me should you have any questions. Thank you for your assistance.

Yours truly,

Juanita Hutchison
Juanita Hutchison

JH/ab
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATLANTIC COAST 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:

CATALIN BRATU
Name of Person

ATLANTIC COAST LLC
Firm/Company

870 DUNLAWTON AVENUE
Address

PORT ORANGE, FLORIDA 32127
City/State and Zip Code

cbratu@att.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catalin Bratu at (386) 451-5876
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: ATLANTIC COAST LLC.

SECOND: The Florida Document Number of the limited liability company is: L06000058967

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

870 Dunlawton Avenue
Port Orange, Florida 32127

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: Hassan Zulfiqar, Manager
Catalin Bratu, Manager
Sohail Kakezai, Manager

b. No authority granted to: NONE

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

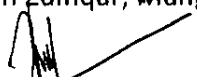
a. Granted to: Hassan Zulfiqar, Manager
Catalin Bratu, Manager
Sohail Kakezai, Manager

b. No authority granted to: NONE

Signatures of authorized representatives:



Hassan Zulfiqar, Manager



Sohail Kakezai, Manager



Catalin Bratu, Manager

FILED
5 FEB 19 AM 10:00
TALLAHASSEE, FLORIDA
CLERK OF STATE