

LD60000 105.304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

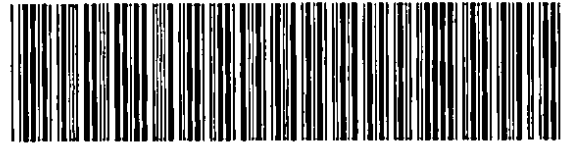
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 DEC 13 PM 10:46
CITY OF

12/13/18 JS

STRAUS & PATEL, P.A.

ATTORNEYS AND COUNSELORS AT LAW

118 WEST ORANGE STREET
ALTAMONTE SPRINGS, FL 32714

TELEPHONE (407) 331-5505
FACSIMILE (407) 331-6308

December 7, 2018

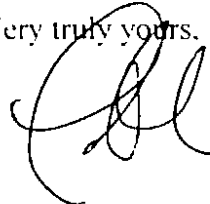
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: OAKMONT OF ORLANDO, LLC
Document No: L06000105304

Dear Sir:

Enclosed please find a Statement of Authority for Oakmont of Orlando, LLC for filing with the FL Department of State. Also enclosed is our firm's check in the amount of \$55.00, said sum representing the \$25.00 filing fee for the Statement of Authority and \$30.00 for a certified copy of the Statement of Authority. Please forward the certified copy of the Statement of Authority at your earliest convenience. Thank you for your assistance in this matter.

Very truly yours,



Prabodh C. Patel

PCP:lpa
Enclosure



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DEC 13 PM 10:46
FIDELITY & SECURITY

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: OAKMONT OF ORLANDO, LLC

SECOND: The Florida Document Number of the limited liability company is: L06000105304

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

2121 West Oak Ridge Road

Orlando, FL 32809

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

10102 Brandon Circle

Orlando, FL 32836

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.

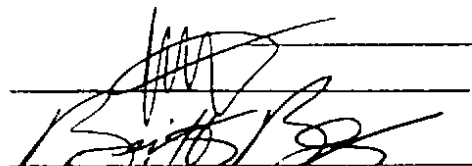
a. Granted to: Brian H. Burbridge and/or Jayant P. Patel

b. No authority granted to: n/a

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

a. Granted to: Brian H. Burbridge and/or Jayant P. Patel

b. No authority granted to: n/a


Signature of authorized representative

Jayant P. Patel
Brian H. Burbridge
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)