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COVER LETTER

	gistration Section vision of Corporations	
SUBJECT:	ORANGE BLUE, LLC	
SOBJECT.	Name of Limited Liability Company	
Dear Sir or	Madam:	
The enclose	d Statement of Authority and fee(s) are submitted for filing.	
Please return	n all correspondence concerning this matter to the following:	
	Name of Person Name of Person	
	Name of Person at 863, 491-7289 Area Code Daytime Telephone Number	
Re _l Div Cli 266	REET/COURIER ADDRESS: gistration Section vision of Corporations fron Building b1 Executive Center Circle llahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
CR2E138 (2	PLEASE RETURN CONTIFIED COMP IN ENCLUSED ENVERONE - THANK YOU! Palm	

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1). Florida Statutes, this limited liability company submits the following statement of authority:

ORANGE BLUE LLC

ECOND: The Florida Document	nt Number of the limited liability company is:L07000029983	3
	timited liability company's principal office is:	
Port Charlotte, FL 3	33952-9181	
The mailing address of t	the limited liability company's principal office is: Boulevard	
Port Charlotte, FL 3	33952-9181	
OURTH: This statement of auth	nority grants or sets limitations of authority on all persons having whether as a member, transferee, manager, officer or otherwise of	the status or
	ument transferring real property held in the name of the company	<u> </u>
a. Granted to:_	Paul B. Seusy	ک بب
-		- Q
b. No authority	granted to:	
2. May enter into other	transactions on behalf of, or otherwise act for or bind, the compa	ny.
2. May enter into other a. Granted to:	transactions on behalf of, or otherwise act for or bind, the compa	ny.
2. May enter into other a. Granted to:	transactions on behalf of, or otherwise act for or bind, the compa	ager