L07000055659

(Requestor's Name)		
(Address)	_	
(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:		
	-	
	1	
	1	
	-	
	1	
	1	
	-	

Office Use Only



400369829874

RECEIVED

JUL 26 2021

07/27/21--01005--027 **30.00



C KILISSA VIIE I I JOSI

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Sand Lake Groves, LLC	
Name of Limited Liability Co	ompany
Dear Sir or Madam:	
The enclosed Statement of Authority and fee(s) are submitted for filin	sg.
Please return all correspondence concerning this matter to the following	ng:
Mary Nell Smith	
Name of Person	
Sand Lake Groves, LLC	
Firm/Company	
5233 Riverlake Drive, Box 58	
Address	_
Bartow, FL 33830	
City/State and Zip Code	
marynellsmith@aol.com	
E-mail address: (to be used for future annual report notificati	ion)
For further information concerning this matter, please call:	
Mary Nell Smithat(863)733-4001
Name of Person Area Code	Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

STATEMENT OF AUTHORITY

Pursuant authority	to section 605.0302(1), Florida Statutes, this limited liability company submits the follow:	ing statement of
FIRST:	The name of the limited liability company is: Sand Lake Groves, LLC	
SECON	D: The Florida Document Number of the limited liability company is: L070000556	59
THIRD:	The street address of the limited liability company's principal office is: 5233 Riverlake Drive, Box 58	
	Bartow, FL 33830	2021 C
	The mailing address of the limited liability company's principal office is: 5233 Riverlake Drive, Box 58	2021 JUL 26 AM SECTALL THAS SE
	Bartow, FL 33830	17:36 ES.FIL
person or	of a person in a company, whether as a member, transferee, manager, officer or otherwise is the following: 1. May execute an instrument transferring real property held in the name of the company a. Granted to: Mary Nell Smith	·
	b. No authority granted to:	
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comp a. Granted to: Mary Nell Smith	any.
	b. No authority granted to:	
1) la	ry Noll Smith Mary Nell Smith	
Signature	or authorized representative Typed or printed name of Filing Fee: \$25.00 Certified Cover \$30.00 (potional)	`signature