

| (Re | questor's Name) | | | |
|---|-------------------|-------------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



200257357942

03/20/14--01008--006 **25.00

B. BOSTICK
MAR 2 4 2014
FYARMIN'ER

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | |
|----------|--|--------------------------------------|---|----------|--------|
| SUBJE | Samson PB, LLC, a Florida | limited liability co | ompany | | |
| 5000 | | imited Liability Comp | pany | | _ |
| Dear Si | r or Madam: | | | | |
| The end | closed Statement of Authority and fee(s) are | e submitted for filing. | | | |
| Please 1 | return all correspondence concerning this m | natter to the following: | | | |
| Maur | a Ziska, Esq. | | | | |
| | Name of Person | | | | |
| Koch | man & Ziska PLC | | | | |
| | Firm/Company | · | | | |
| 222 L | akeview Avenue, Suite 1500 | | | | |
| | Address | | | | ~3 |
| West | Palm Beach, Florida 33401 | | | ŧ | 7 1 |
| | City/State and Zip Code | | | | : ن |
| mzisł | ka@floridawills.com | | | • | ·> |
| | E-mail address: (to be used for future ann | nual report notification | n) | • | - i |
| For furt | ther information concerning this matter, ple | ase call: | | .2.1 | |
| Maur | a Ziska, Esq. | 561 | 802-8960 | | |
| | Name of Person | Area Code | Daytime Telephon | e Number | |
| | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | Registrati Division o P.O. Box | G ADDRESS: ion Section of Corporations 6327 ee, Florida 32314 | | |

STATEMENT OF AUTHORITY

| Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following authority: | |
|---|--|
| FIRST: The name of the limited liability company is: Samson PB, LLC, a Florida limited | |
| liability company | |
| SECOND: The Florida Document Number of the limited liability company is: L07000074728 | |
| THIRD: The street address of the limited liability company's principal office is: 2 N. Breakers Road, #NPH3 | |
| Palm Beach, Florida 33480 | |
| The mailing address of the limited liability company's principal office is: 2 N. Breakers Road, #NPH3 | |
| Palm Beach, Florida 33480 | |
| FOURTH: This statement of authority grants or sets limitations of authority on all persons having the position of a person in a company, whether as a member, transferee, manager, officer or otherwise or person on the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: Roy J. Zuckerberg | |
| b. No authority granted to: No authority granted to: | C-73 C-73 C-74 C-74 C-74 C-74 C-74 C-74 C-74 C-74 |
| 2. May enter into other transactions on behalf of, or otherwise act for or bind, the compana. Granted to: Roy J. Zuckerberg | y. 0 |
| b. No authority granted to: N/A | ,4 W - |
| Roy J. Zuckerberg, M. | |
| Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional) | ignature |

CR2E138 (2/14)