

LD8000040348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

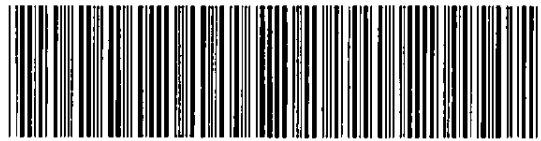
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jurist Properties, 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:

Robert D. Eckard, Esq.

Name of Person

Robert Eckard & Associates, P.A.

Firm/Company

3110 Palm Harbor Blvd.

Address

Palm Harbor, FL 34683

City/State and Zip Code

Robert@RobertEckardLaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert D. Eckard

at (727)

772-1941

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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SECRETARY OF STATE
TALLAHASSEE, FL

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: Jurist Properties, LLC

SECOND: The Florida Document Number of the limited liability company is: 608000040348

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

3106 Palm Harbor Blvd.

Palm Harbor, FL 34683

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

3110 Palm Harbor Blvd.

Palm Harbor, FL 34683

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:

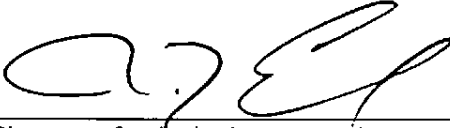
a. Granted to: Robert D. Eckard

b. No authority granted to: Jeffrey Herzog

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

a. Granted to: Robert D. Eckard, Esq.

b. No authority granted to: _____


Signature of authorized representative

R.D. ECKARD

Robert D. Eckard

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

**Provided to you Courtesy of
The Law Office of Robert Eckard**

& Associates, P.A.

(727) 772-1941