

109000028712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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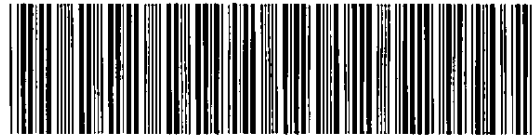
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TAL PHILLIPS

D SCOTT
JUL 5 2017



**PERLAND TITLE &
ESCROW SERVICES CORP**

June 23, 2017

Florida Department of State
Registration Section
Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Re: Buyer: Danyas Vengroup Inc
Seller: TW Marina Oaks Management, LLC
Property: 2550 SW 18 Terrace # 2106, Fort Lauderdale, FL 33315
File: 74000-136

Dear Sir/Madam:

Enclosed please find check No.12261 in the amount of \$55.00, representing payment pertaining to the filing fee of \$25.00 and \$30.00 fee for the certified copy of the Statement of Authority attached. A self addressed stamped envelope is enclosed to return the certified copy for the above referenced real estate transaction.

If you have any questions, please do not hesitate to contact our office.

Sincerely,
Perland Title & Escrow Services Corp.

By: *J. Galvis*
Post Closing Department

FILED
17 JUN 29 AM 11:34
TALLAHASSEE, FL 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TW MARINA OAKS MANAGEMENT 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:

MAITE GOMEZ

Name of Person

PERLAND TITLE & ESCROW SERVICES CORP

Firm/Company

9100 S. DADELAND BLVD., SUITE 514

Address

MIAMI, FLORIDA 33156

City/State and Zip Code

PROCESSING@PERLANDTITLE.COM

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

For further information concerning this matter, please call:

MAITE GOMEZ at (305) 846-7880
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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17 JUN 29 AM 11:34
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

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: TW MARINA OAKS MANAGEMENT LLC

SECOND: The Florida Document Number of the limited liability company is: L09000028712

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

5004 CURRIE DRIVE

OXFORD, MS 38655

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

5004 CURRIE DRIVE

OXFORD, MS 38655

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: TODD WADE

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: TODD WADE

b. No authority granted to: N/A


Signature of authorized representative

TODD WADE
Typed or printed name of signature

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

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