

L09 000 113782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

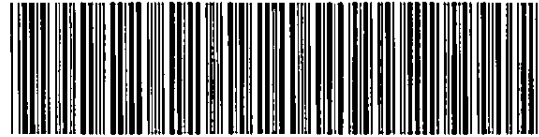
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100303406491

09/13/17--01018--002 \*\*55.00

*[Handwritten signature]*  
9/13/17

17 SEP 13 AM 8:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: ROMANO INVESTMENT & MANAGEMENT GROUP, 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:

Joseph E Seagle

Name of Person

Joseph E Seagle PA

Firm/Company

924 W Colonial Dr

Address

Orlando, FL 32804

City/State and Zip Code

joe@seaglelaw.com

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

For further information concerning this matter, please call:

Joseph E Seagle

at (

407

Area Code

770-0100 ext 102

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

*Please Return a  
Certified copy.*

**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: \_\_\_\_\_

**ROMANO INVESTMENT & MANAGEMENT GROUP, LLC**

**SECOND:** The Florida Document Number of the limited liability company is: L09000113782

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

5009 79th Avenue Plz. E.

Sarasota, FL 34243

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

5009 79th Avenue Plz. E.

Sarasota, FL 34243

**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: Anthony Alexander or Jorge A. Oliveira, acting

jointly or severally

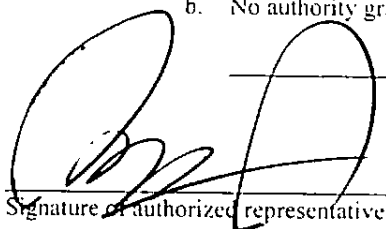
b. No authority granted to: Not Applicable

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

a. Granted to: Anthony Alexander or Jorge A. Oliveira, acting

jointly or severally

b. No authority granted to: Not Applicable

  
Signature of authorized representative

Anthony Alexander

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

**FILED**  
**17 SEP 13 AM 8:23**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**