

# L10000013917

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Avalon Storage, 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:

James L. Caro

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

5845 Westmont Road

\_\_\_\_\_  
Address

Milton, Florida 32583

\_\_\_\_\_  
City/State and Zip Code

jimcaro50@gmail.com

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

For further information concerning this matter, please call:

James L. Caro

850

607-1691

at ( )

\_\_\_\_\_  
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

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: Avalon Storage, LLC

SECOND: The Florida Document Number of the limited liability company is: L10000013917

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

3996 Avalon Blvd.

Milton, Florida 32583

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

3996 Avalon Blvd.

Milton, Florida 32583

TALLAHASSEE, FLORIDA

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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.

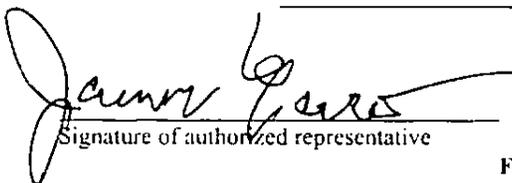
a. Granted to: James L. Caro, Majority and Managing Member of  
Avalon Storage, LLC

b. No authority granted to: Chris D. Deluca or Covering, LLC

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

a. Granted to: James L. Caro, Majority and Managing Member of Avalon  
Storage, LLC

b. No authority granted to: Chris D. Deluca or Covering, LLC



Signature of authorized representative

James L. Caro

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)