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## **COVER LETTER**

TO: Registration Section Division of Corporations		
Gerhard Rental Properties, LLC SUBJECT:		
	ted Liability Comp	any
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are sub-	bmitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Bradley Paul Gerhard		
Name of Person		
Gerhard Rental Properties, LLC		
- Firm/Company		
823 E. Oakland Park Blvd	•	
Address		
Oakland Park , FL 33334		
City/State and Zip Code		
bradgerhard@comcast.net		
E-mail address: (to be used for future annual	report notification	)
For further information concerning this matter, please	call:	
Bradley Paul Gerhard	954	565-6333
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	Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314

## STATEMENT OF AUTHORITY

authority		ing statemer	it of	
FIRST:	The name of the limited liability company is: Gerhard Rental Properties, LLC			
SECONI	D: The Florida Document Number of the limited liability company is: L10000119450	)		
	The street address of the limited liability company's principal office is:  823 E. Oakland ParkBlvd			
,	Oakland Park, FL 33334			
•	The mailing address of the limited liability company's principal office is:			
position (	H: This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise in the following:			
	May execute an instrument transferring real property held in the name of the company     a. Granted to:	y.		
	b. No authority granted to: Melanie Harris	TALLA	14 AF	والمناور
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comp  a. Granted to:	any.	R 14 變 0	STATE OF THE PARTY
	b. No authority granted to: Melanie Harris	TATE ORIDA	9: 53 53	
Signature	Bradley Paul Gerhal Typed or printed name of Filing Fee: \$25.00		_	

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)