

L110000044323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

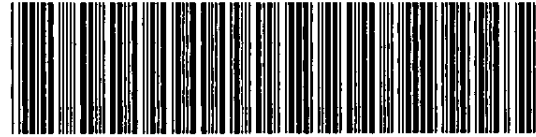
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. SCOTT  
MAR 28 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Leading Lady 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:

Sheila Biehl

Name of Person

Leading Lady LLC

Firm/Company

815 SE Osceola Street

Address

Stuart, FL 34994

City/State and Zip Code

sbiehl@sheilabiehl.com

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

For further information concerning this matter, please call:

Sheila Biehl

at (

772

Area Code

485-3086

Daytime Telephone Number

Name of Person

**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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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: Leading Lady LLC

SECOND: The Florida Document Number of the limited liability company is: L11000044323

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

815 SE Osceola Street

Stuart, FL 34994

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

Same

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: Sheila Biehl, Manager

b. No authority granted to: Brandon Moe

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

a. Granted to: Sheila Biehl

b. No authority granted to: Brandon Moe

Sheila Biehl  
Signature of authorized representative

Sheila Biehl, Manager  
Typed or printed name of signature

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

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