

L11000113530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

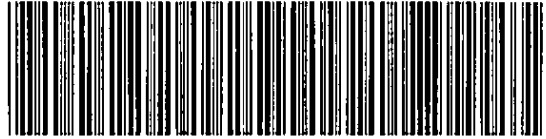
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S. TALLENT  
FEB 11 2020

FILED  
2020 JAN 13 PM 12:18  
FEB 11 2020

Stakeholder  
6x  
Authenticity

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Deb's Coffee Drive-Thru, 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:

Debra Rogers

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

Deb's Coffee Drive-Thru, LLC

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

9050 Navarre Pkwy

\_\_\_\_\_  
Address

Navarre, FL 32566

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

debscoffeedrivethru@yahoo.com

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

For further information concerning this matter, please call:

Debra Rogers

707 888-9163  
\_\_\_\_\_  
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: Deb's Coffee Drive-Thru, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L11000113530

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

9050 Navarre Pkwy

Navarre, FL 32566

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

9478 Bone Bluff Dr

Navarre, FL 32566

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STATE

**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.

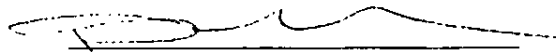
a. Granted to: Debra Rogers, Robert Guinn, Tiffany Guinn

b. No authority granted to: \_\_\_\_\_

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

a. Granted to: Debra Rogers, Robert Guinn, Tiffany Guinn

b. No authority granted to: \_\_\_\_\_

  
\_\_\_\_\_  
Signature of authorized representative

Debra Rogers

\_\_\_\_\_  
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)