

Jan. 27. 2015 10:49AM
Division of Corporations

FOX WACKEEN DUNGEY 772-283-4637

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L/ 2000027941

Florida Department of State

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FOX, WACKEEN, DUNGEY, SEELEY, SWEET, BEARD & SOBEL, LLP
Account Number : 076247002541
Phone : (772) 287-4444
Fax Number : (772) 283-4637

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: leo@deltasystems.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OIEN FAMILY MANAGEMENT, LLC

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T. Burch JAN 28 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OIEN FAMILY MANAGEMENT, 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:

Debbie Sigafoose

Name of Person

Fox, Wackeen, Dungey, et. al., LLP

Firm/Company

3473 SE Willoughby Boulevard

Address

Stuart, Florida 34994

City/State and Zip Code

leo@deltasystems.com

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

For further information concerning this matter, please call:

Debbie Sigafoose

Name of Person

at 772

Area Code

287-4444

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

CR2E138 (2/14)

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: OIEN FAMILY MANAGEMENT, LLC

SECOND: The Florida Document Number of the limited liability company is: L12000027941

THIRD: The street address of the limited liability company's principal office is:
1216 SE Colony Way, Jupiter, Florida 33478

The mailing address of the limited liability company's principal office is:
1216 SE Colony Way, Jupiter, Florida 33478

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the rights or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or on a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.


a. Granted to: Lynn Oien & June Oien

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: Lynn Oien & June Oien

b. No authority granted to: _____



Signature of authorized representative

Lynn Oien & June Oien

Typed or printed name of signature

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

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