1/2000/6/502

| (Re | questor's Name) | | |
|---|-------------------|-------------|--|
| (Address) | | | |
| (Ad | dress) | | |
| _ (Cit | y/State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
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COVER LETTER

| TO: | Registration Section Division of Corporations | %, %. | | |
|---------|--|----------------------|-----------|--------|
| SUBJE | | - 411 | · | |
| | Name of Limited Liability Com | pany | | |
| Dear S | r or Madam: | | | |
| The en | closed Statement of Authority and fee(s) are submitted for filing. | · | | |
| Please | return all correspondence concerning this matter to the following | : | | |
| Richa | ard Franzbiau | | | |
| | Name of Person | | | |
| Richa | ard Franzblau LLC | | | |
| | Firm/Company | | | |
| 1802 | Alafaya Trail | | | |
| | Address | | | |
| Orlan | do, FL 32826 | TAL | 23 23 | |
| | City/State and Zip Code | ראד | 2016 DEC | 77 |
| spark | letu6@gmail.com | T. C. | | F |
| | E-mail address: (to be used for future annual report notification | 1) | FG D | [] |
| For fur | her information concerning this matter, please call: | | A to 25 | ****** |
| Richa | ard Franzblau 407 | 770-2520 | 26 107 | |
| | Name of Person . Area Code | Daytime Telephone No | ımber | |
| | | | | |

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

STATEMENT OF AUTHORITY

| Pursuant to section 605.0302(1), Florida Statutes, this limited liability comparauthority: | |
|---|--|
| FIRST: The name of the limited liability company is: Sparkle Two, LLC | <u> </u> |
| SECOND: The Florida Document Number of the limited liability company is | s: L12000161502 |
| THIRD: The street address of the limited liability company's principal office 1614 N. US Highway 1 | |
| Ormond Beach, FL 32174 | |
| The mailing address of the limited liability company's principal of 1614 N. US Highway 1 | |
| Ormond Beach, FL 32174 | |
| FOURTH: This statement of authority grants or sets limitations of authority position of a person in a company, whether as a member, transferee, manager, person on the following: 1. May execute an instrument transferring real property held in the a. Granted to: Hsiu Lan Tu | , officer or otherwise or to a specific |
| b. No authority granted to: N/A | ATTASSES FL |
| May enter into other transactions on behalf of, or otherwise act a. Granted to: Hsiu Lan Tu | for or bind, the company |
| b. No authority granted to: N/A | |
| | u Lan Tu ped or printed name of signature |

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)