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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: \_\_

476 Balsam Court, 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:

1121 Martinique Court, LLC

Name of Person

Law Office of Christopher A. Roche

Firm/Company

229 N. Collier Boulevard

Address

Marco Island, FL 34145

City/State and Zip Code

croche@marcolawoffice.com

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

For further information concerning this matter, please call:

Christopher A. Roche

389-0700

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 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, Florida 32314

CR2E138 (2/14)

## STATEMENT OF AUTHORITY

ursuant uthority	to section $605.0302(1)$ , Florida Statutes, this limited liability company submits the following:	statement
FIRST:	The name of the limited liability company is: 476 Balsam Court, LLC	
ECONI	D: The Florida Document Number of the limited liability company is: <u>L13000025070</u>	
HIRD:	The street address of the limited liability company's principal office is:	
	11011 Sheridan Street, #303, Cooper City, FL 330	26
	The mailing address of the limited liability company's principal office is:  11011 Sheridan Street, #303, Cooper City, FL 3302	6
OURTI	H: This statement of authority grants or sets limitations of authority on all persons having the	e etatus or
sition (	of a person in a company, whether as a member, transferee, manager, officer or otherwise or to the following:	
	May execute an instrument transferring real property held in the name of the company.	
	Matthew Emply	
	a. Granted to: Matthew Frank	٦.
	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: Matthew Frank	رم! مما
		•
	b. No authority granted to:	
<u>~</u>		
fen	eterflile. The Christopher A. R	oche
ignature	e of authorized representative Typed or printed name of sig Filing Fee: \$25.00	nature

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)