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SECRETARY, OF STATE

K. SALY JAN 3 0 2017

JMW | LAW OFFICES | JAMES M. WEAVER, PA

January 25, 2017

Registration Section Division of Corporation Post Office Box 6327 Tallahassee, FL 32314

Re: Coppola Properties, LLC

Dear Sir or Madam:

Enclosed please find the Statement of Authority for filing for Coppola Properties, LLC.

Also enclosed please find our general check # 2886 in the amount of \$25.00.

If you should have any questions or need anything further, please do not hesitate to call.

Sincerely yours,

Melissa Shields

Florida Registered Paralegal

/sl/ms

Enclosures

cc via email: Carl M. Coppola, III, Member Manager, Coppola Properties, LLC

Carol Brown, Real Estate Title Services

James M. Weaver*
*Also Admitted in Georgia

240 East Park Avenue Lake Wales, FL 33853

COVER LETTER

Division of Corporations COPPOLA PROPERTIES, LLC SUBJECT: 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: CARL M. COPPOLA, III Name of Person COPPOLA PROPERTIES, LLC Firm/Company 7536 BLACK ROAD Address LAKE WALES, FL 33898 City/State and Zip Code 9mac Cuerizon E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 414.3886 CARL M. COPPOLA, III Name of Person Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

TO:

Registration Section

STATEMENT OF AUTHORITY

authority	y :			ed liability company submits the fol	_	
FIRST:	The name of	e of the limited liability company is: COPPOLA PROPERTIES, LLC				
SECON	D: The Flo	rida Document Nu	umber of the limited li	iability company is: L13000028	561	
THIRD		address of the lim	ited liability company	y's principal office is:	덛	
	LAKE W	ALES, FL 338	898			
	The mailing address of the limited liability company's principal off			any's principal office is:	SSEE TO	
	LAKE WALES, FL 33898					
	n the follow	ring: secute an instrume Granted to:	ent transferring real pr THER CARL M. (operty held in the name of the components held in the name of the components in the name of the comp	pany.	
	b.	No authority gra	anted to:			
	 May e a. b. 	Granted to:	ANN COPPOLA	, or otherwise act for or bind, the co COPPOLA III, MEMBER I	ompany. MG R	
Γ	n () n				— —	
Signatur	e of authoriz	zed depresentative		CARL M. COPPO Typed or printed name		
	•	V	Filing Fee: Certified Cop	\$25.00 y: \$30.00 (optional)		

CR2E138 (2/14)