

L13000067994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Storey
LAW GROUP

Edward A. Storey III
Suzanne V. Delaney
Christian J. Gendreau
Jamie L. Storey
Rosannie T. Morgan
John J. Schreiber
Tamara Wasserman
Alexandra Michelini

March 24, 2016

VIA U.S. MAIL

CLIENT/MATTER NUMBER: 1925-003

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: **Flat Head Property LLC & Virginia Drive LLC**

Dear Sir/Madam:

Enclosed please find the following documents for filing with the Division of Corporations:

- A Statement of Authority for Flat Head Property LLC; and
- A Statement of Authority for Virginia Drive, LLC.

Also enclosed please find our firm trust account check no. 4538, in the amount of \$50.00, in full payment of the filing fees for both Statements.

Thank you and should you have any questions concerning this, please feel free to contact me.

Sincerely,

Darcey E. Durant, CLA
Certified Paralegal

/dd
Encls.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLAT HEAD PROPERTY 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:

EDWARD A. STOREY III, ESQ.

Name of Person

STOREY LAW GROUP, P.A.

Firm/Company

3191 MAGUIRE BLVD., STE. 257

Address

ORLANDO, FL 32803

City/State and Zip Code

ESTOREY@STOREYLAWGROUP.COM

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

For further information concerning this matter, please call:

EDWARD A. STOREY III, ESQ.

Name of Person

at (407)

Area Code

488-1225

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

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: FLAT HEAD PROPERTY LLC

SECOND: The Florida Document Number of the limited liability company is: L13000067994

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

51 E. JEFFERSON STREET, #2369

ORLANDO, FL 32802

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

51 E. JEFFERSON STREET, #2369

ORLANDO, FL 32802

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: JOHN O. MANSOUR

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: _____

b. No authority granted to: _____


Signature of authorized representative

John Mansour
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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