

L13000069740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

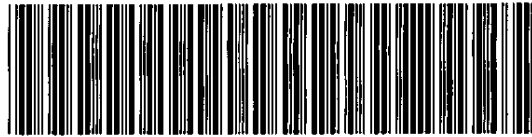
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700296504087

FILED
2017 APR 25 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
RECEIVED
DEPARTMENT OF STATE
17 APR 25 AM 10:50

K. SALY

APR 26 2017

Account#: I20000000088

Date: 04/24/2017

Name: Marisa Kugelmann

Reference #: T009486

ENTITY NAME: SUMMER LAKE VILLAS, LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☒ Amendment
- ☐ Annual Report
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☒ Other: certified copy upon filing

Authorized Amount: \$55.00

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUMMER LAKE VILLAS, 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:

GEORGE BEFELER, ESQ.

Name of Person

HOMER BONNER JACOBS, P.A.

Firm/Company

1441 BRICKELL AVENUE, SUITE 1200

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

gbefeler@homerbonner.com

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

For further information concerning this matter, please call:

GEORGE BEFELER, ESQ. at (305) 350-5159
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

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: SUMMER LAKE VILLAS LLC

SECOND: The Florida Document Number of the limited liability company is: L13000069740

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

c/o Herbert Jordan

2750 N.W. 79th Avenue

Miami, Florida 33122

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

c/o Herbert Jordan

2750 N.W. 79th Avenue

Miami, Florida 33122

FILED
2011 APR 25 AM 6:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

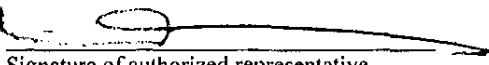
a. Granted to: HERBERT JORDAN

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: HERBERT JORDAN

b. No authority granted to: _____


Signature of authorized representative

George Beeler
Typed or printed name of signature

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

CR2E138 (2/14)

Attorney
AT
LAW