

L13000092708

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.
Account Number : I200100000025
Phone : (786) 899-2235
Fax Number : (786) 899-2318

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VINTAGE HOMES AT DELAIRE, LLC

Certificate of Status	0
Certified Copy	1
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Division of Corporations

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VINTAGE HOMES AT DELAIRE, 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:

Richard A. Swartz

Name of Person

Vintage Homes at Delaire, LLC

Firm/Company

6001 Broken Sound Parkway, Suite 504

Address

Boca Raton, FL 33487

City/State and Zip Code

rswartz@rasmanagementcorp.com

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

For further information concerning this matter, please call:

Richard A. Swartz

561

994-7570

at ()

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)

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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: VINTAGE HOMES AT DELAIRE, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000092708

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

6001 Broken Sound Parkway, Suite 504

Boca Raton, FL 33487

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

6001 Broken Sound Parkway, Suite 504

Boca Raton, FL 33487

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: Richard A. Swartz, Authorized Member or

Robert Rohdie, Authorized Member

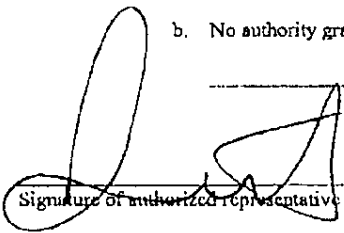
b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Richard A. Swartz, Authorized Member or

Robert Rohdie, Authorized Member

b. No authority granted to: _____


Signature of authorized representative

Richard A. Swartz

Typed or printed name of signature

Filing Fee: \$25.00

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