

L13000110265

10/28/2016 14:00 FAX 561 855 5551

001/003

Division of Corporations

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Florida Department of State  
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Account Name : ARNSTEIN & LEHR LLP  
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Phone : (561) 833-9800  
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Email Address: lkdunne@arnstein.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
YOUTHFUL BALANCE MEDICAL CENTER, LLC

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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: YOUTHFUL BALANCE MEDICAL CENTER, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L13000110265

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

10887 N. MILITARY TRAIL, SUITE 7

PALM BEACH GARDENS, FL 33410

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

10887 N. MILITARY TRAIL, SUITE 7

PALM BEACH GARDENS, FL 33410

**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: JENNIFER L. NICHOLSON

b. No authority granted to: ANGEL CUESTA

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

a. Granted to: JENNIFER L. NICHOLSON

b. No authority granted to: ANGEL CUESTA

  
Signature of authorized representative

JOHN A. TURNER, ESQ.

Typed or printed name of signature

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