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B. BOSTICK

FEB 2 1 2014

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Cruise Inn Holdings, 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:

Judith A. Jarvis

Name of Person

Vantage Hospitality Group, Inc.

Firm/Company

3300 N. University Drive, Suite 500

Address

Coral Springs, Florida 33065

City/State and Zip Code

jjarvis@vantagehospitality.com

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

For further information concerning this matter, please call:

Judith A. Jarvis

...954

575-2668 ex. 147

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, Florida Statutes, this limited liability company submits the following statement of authority:

FIRST:	The name of the limited liability company is: Cruise Inn Holdings, LI	_C		
		L13	600	13
SECON	The street address of the limited liability company's principal office is: 3300 North University Drive			
	Suite 500			
	Coral Springs, Florida 33065			
	The mailing address of the limited liability company's principal office is: 3300 North University Drive			
	Suite 500			
	Coral Springs, Florida 33065			
person o	the following: . May execute an instrument transferring real property held in the name of the contain. a. Granted to: Adam B. Frisch, Bernard T. Moyle Scott W. Anderson	npany.	on Ta	
	b. No authority granted to: Any other person			
	May enter into other transactions on behalf of, or otherwise act for or bind, the a. Granted to: Adam B. Frisch, Bernard T. Moyle Scott W. Anderson	company	ე წ ლ	
	b. No authority granted to: Any other person			
Signatui	of authorized representative ALAN L. 7 Typed or printed na	ALL 13		_

Filing Fee: \$25.00

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