L13000146433

Florida Department of State
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THE GENTLEMEN'S BARBER, LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE GENTLEMEN'S BARBER, 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:

MATTHEW S. BROWN
Name of Person

THE GENTLEMEN'S BARBER, LLC
Firm/Company

P. O. BOX 1097
Address

PALM CITY, FL 34991
City/State and Zip Code

CSORVILLO@MBROWN-LLC.COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

CORINNA SORVILLO at (772) 220-8600 EXT. 138
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: THE GENTLEMEN'S BARBER, LLC

SECOND: The Florida Document Number of the limited liability company is: L13000146433

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

1950 SE FEDERAL HIGHWAY

STUART, FL 34994

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

P. O. BOX 1097

PALM CITY FL 34991

FILED
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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:

   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: JORLEY JORGE CRUZ

   b. No authority granted to:

Signature of authorized representative

MATTHEW S. BROWN
Typed or printed name of signature

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

CR2E138 (2/14)