

Division of Corporations

**L14000001096**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : SHUTTS & BOWEN LLP OPERATING ACCOUNT  
Account Number : I20030000037  
Phone : (561)835-8500  
Fax Number : (561)650-8530

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ROSEMONT ASSOCIATES, LLC

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C. LEWIS

MAR 28 2014

EXAMINER

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**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: ROSEMONT ASSOCIATES, LLC; Document Number L14000001096

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

3140 S. Ocean Boulevard, #205N

Palm Beach, FL 33480

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

3140 S. Ocean Boulevard, #205N

Palm Beach, FL 33480

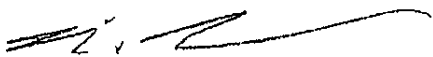
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**THIRD:** This statement of authority grants or sets limitations of authority to a specific person with respect to the following:

a. BETH STEFFANELLI may enter into transactions on behalf of, or otherwise act for or bind, the Company for the purpose of carrying on the day-to-day business of the Company; opening and maintaining bank accounts in the name of the Company; and signing checks on behalf of the Company.

b. This Statement of Authority grants no authority to BETH STEFFANELLI to borrow or make any loans in the name of the Company or to perform such other acts not specifically stated in this Statement of Authority.



Signature of Authorized Representative

Rikki Lober Bagatell

Typed or Printed Name of Signature

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

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