

L14 0000 24919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

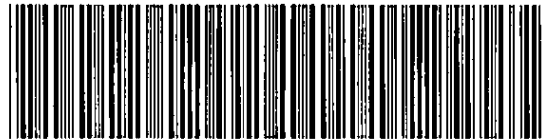
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600343836656

05/15/20--01012--022 **30.00

20 MAY 15 PM 3:52

30101203
C. M. S. 102

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VENETIAN APARTMENT HOMES, 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:

PAULA FIANO

Name of Person

VENETIAN APARTMENT HOMES, LLC

Firm/Company

3125 SOUTH RIDGEWOOD AVENUE

Address

SOUTH DAYTONA, FL 32119

City/State and Zip Code

paulafiano@hotmail.com

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

For further information concerning this matter, please call:

Paula Fiano

386
at ()

679-3437

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

20 MAY 15 PM 3:56

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: VENETIAN APARTMENT HOMES, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000024919

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

3125 SOUTH RIDGEWOOD AVENUE

SOUTH DAYTONA, FL 32119

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

3125 SOUTH RIDGEWOOD AVENUE

SOUTH DAYTONA, FL 32119

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: PAULA FIANO or VALENTINO FIANO

b. No authority granted to: no others authorized

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

a. Granted to: PAULA FIANO or VALENTINO FIANO

b. No authority granted to: no others authorized

Paula Fiano
Signature of authorized representative

PAULA FIANO, MANAGER

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)