

L14000049159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SRC ENTERPRISES 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:

SEAN C. SELK

Name of Person

SEAN C. SELK PA

Firm/Company

301 CLEMATIS STREET, SUITE 3000

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

SSELK@SELKLAW.COM

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

For further information concerning this matter, please call:

SEAN C. SELK

Name of Person

561
at ()

Area Code

228-1848

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

FIRST: The name of the limited liability company is: SRC ENTERPRISES LLC

SECOND: The Florida Document Number of the limited liability company is: L14000049159

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

515 NW 1ST AVE, DELRAY BEACH, FL 33444

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

515 NW 1ST AVE, DELRAY BEACH, FL 33444

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.

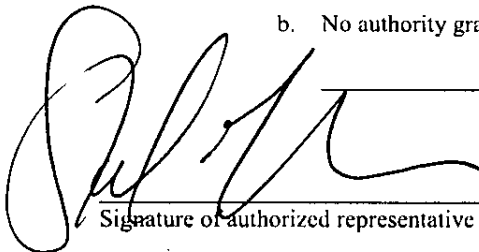
a. Granted to: STELIOS FINDRILAKIS

b. No authority granted to: FRANCIS RYAN ZOFAY

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

a. Granted to: STELIOS FINDRILAKIS

b. No authority granted to: FRANCIS RYAN ZOFAY


Signature of authorized representative

STELIOS FINDRILAKIS

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

14 JUL 22 AM 9:08