

L14 0000 59788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JOWI INVESTMENTS 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:

**S. SCOTT CRITZER**

\_\_\_\_\_  
Name of Person

**CRITZER LAW FIRM PA**

\_\_\_\_\_  
Firm/Company

**12889 US HIGHWAY 98 WEST UNIT 110A**

\_\_\_\_\_  
Address

**MIRAMAR BEACH FL 32550**

\_\_\_\_\_  
City/State and Zip Code

**SCOTT@CRITZERLAW.COM**

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

For further information concerning this matter, please call:

**S. SCOTT CRITZER**

\_\_\_\_\_  
Name of Person

**850** at (\_\_\_\_\_) **685-4285**

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

**FIRST:** The name of the limited liability company is: JOWI INVESTMENTS LLC

**SECOND:** The Florida Document Number of the limited liability company is: L14000059788

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

431 LEE ROAD 931

SMITHS STATION ALABAMA 36877

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

431 LEE ROAD 931

SMITHS STATION ALABAMA 36877

**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.

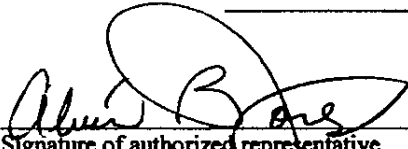
a. Granted to: ALVIN B. JONES

b. No authority granted to: N/A

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

a. Granted to: ALVIN B. JONES

b. No authority granted to: N/A

  
Signature of authorized representative

ALVIN B. JONES, MANAGER

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)