L14000085951

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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ATTORNEYS AT LAW

SCOTT, HARRIS, BRYAN, BARRA & JORGENSEN, P.A.

June 20, 2014

Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Attention: Registration Section

RE: 111 Timber Lane, LLC

Dear Sir/Madam:

Submitted for filing is a Statement of Authority. Kindly file the same and provide us with confirmation of its filing. Please further provide us with a certified copy of the Statement of Authority, so that we may record the same in the Public Records of Palm Beach County, Florida. I am enclosing herein this firm's check payable to the Secretary of State, in the amount of \$55.00, representing the \$25.00 filing fee, and the certified copy fee of \$30.00.

Thank you for your attention to these matters.

Very trally yours,

Kathleen M. Brandon Real Estate Paralegal

/kmb

Enclosures

COVER LETTER

Division of Corporations	•				
111 TIMBER LANE, LLC, a I SUBJECT:	Florida limited lia	ability company			
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 ma	atter to the following:				
TINA MARRA					
Name of Person					
111 TIMBER LANE, LLC					
Firm/Company					
18100 PALM POINT DRIVE					
Address					
JUPITER, FLORIDA 33458					
City/State and Zip Code	<u> </u>				
mama3rn@yahoo.com					
E-mail address: (to be used for future annu	ual report notification	n)			
For further information concerning this matter, plea	se call:				
TINA MARRA	561	262-0718			
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				

TO: Registration Section

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the followi authority:	ng staten	nent of	f
FIRST: The name of the limited liability company is: 111 TIMBER LANE, LLC,	_		
a Florida limited liability company			_
SECOND: The Florida Document Number of the limited liability company is: <u>L14000085951</u>			
THIRD: The street address of the limited liability company's principal office is: 18100 PALM POINT DRIVE			
JUPITER, FLORIDA 33458			
The mailing address of the limited liability company's principal office is: SAME AS ABOVE			
FOURTH: This statement of authority grants or sets limitations of authority on all persons having position of a person in a company, whether as a member, transferee, manager, officer or otherwise of person on the following: 1. May execute an instrument transferring real property held in the name of the company a. Granted to: TINA MARRA	or to a spe		
b. No authority granted to:		57-	. ۰ س
May enter into other transactions on behalf of, or otherwise act for or bind, the compa a. Granted to: TINA MARRA	myz (JUN 23 58	d to
b. No authority granted to:	99.5 19.5 19.5 19.5 19.5 19.5 19.5 19.5	9:17	Sement.
Jane Mara TINA MARRA			
Signature of authorized representative Typed or printed name of Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	signature	;	

CR2E138 (2/14)