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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	JANS INVESTMENT COM	PANY, LLC		
Name of Limited Liability Company				
Dear S	ir or Madam:			
The end	closed Statement of Authority and fee(s) are	re submitted for filing.		
Please	return all correspondence concerning this i	matter to the following	:	
NICH	IOLAS FELZEN			
	Name of Person			
LAW	OFFICES OF NICHOLAS FELZ	EN, P.A.		
	Firm/Company			
1360	S. DIXIE HWY, SUITE 340			
	Address			
COR	AL GABLES, FL 33146			
	City/State and Zip Code	-		
nfelze	en@gmail.com			
	E-mail address: (to be used for future ann	nual report notification)	
For furtl	her information concerning this matter, plo	ease call:		
Nick F	Felzen	786	787-7650	
	Name of Person	Area Code	Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee. Florida 32314	

Tallahassee, Florida 32301

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: _______ INVESTMENT COMPANY, LLC SECOND: The Florida Document Number of the limited liability company is: L14000096641 THIRD: The street address of the limited liability company's principal office is: C / O NICK FELZEN 60 Edgewater Drive, 15E Coral Gables, FL 33133 The mailing address of the limited liability company's principal office is: c / o Nick Felzen 60 Edgewater Drive, 15E Coral Gables, FL 33133 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. Granted to: Anthony Felzen b. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: Anthony Felzen b. No authority granted to: Sallie Felzen, President of mgr Typed or printed name of signature ure of authorized representative \$25.00 Filing Fee: Certified Copy: \$30.00 (optional)
Nick Felzen, Member