114000133605

(i	Requestor's Name)	-
	Address)	<u> </u>
	Address)	
	City/State/Zip/Phone #)	
	WAIT	MAIL
(1	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		

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JAN 1 4 2020 S. YOUNG

305 Marlins, LLC

8501 Atlantic Avenue, Wildwood Crest, NJ 0260 Phone: (609) 729-8562 • Fax: (609) 522-7756

December 4, 2019

Registration Section
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Statement of Authority

Dear Sir/Madam:

In connection with the referenced matter, enclosed please find the original Statement of Authority. Also enclosed please find our check in the amount of \$25.00 representing the filing fee. Please have the enclosed document filed and returned to me in the enclosed self-addressed, stamped envelope.

If you have any questions feel free to contact me.

Sincerely,

305 Marlins, LLC

Michael A. DiAntonio, Sr.

/aabs Enclosures

COVER LETTER

TO: Registration Section Division of Corporations		
305 Marlins LLC		
SUBJECT: Name of L	imited Liability Com	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filing.	
Please return all correspondence concerning this m	atter to the following	;
Michael A. DiAntonio, Sr.		
Name of Person		
305 Marlins, LLC		
Firm/Company	· 	
8501 Atlantic Avenue		
Address		
Wildwood Crest, NJ 08260		
City/State and Zip Code		
lizfox@pmtmanagement.com		
E-mail address: (to be used for future annu	ual report notification	1)
For further information concerning this matter, plea	ase call:	
Liz Fox	609	729-8562
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

_	hority: 305 Marlins, LLC RST: The name of the limited liability company is:		
IRST:	The name of the limited hability company is:		
		L14000133605	
ECONI	D: The Florida Document Number of the limited liab	ility company is:	
HIRD:	The street address of the limited liability company's 17 Cache Cay Drive	principal office is:	
	Vero Beach, FL 32963		
	The mailing address of the limited liability company 8501 Atlantic Avenue	y's principal office is:	
	Wildwood Crest, NJ 08260		
•			
	a. Granted to:		
	Ornulf Tho b. No authority granted to:		
;	2. May enter into other transactions on behalf of, of Ornulf Thoresen a. Granted to :		
	b. No authority granted to:		
Inc	be The tonio	Michael A. DiAntonio, Sr.	
ignature	of authorized representative Filing Fee:	Typed or printed name of signature \$25.00 \$30.00 (optional)	

CR2E138 (2/14)