

# L14000163365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2015 MAY 29 AM 9:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER  
JUN -2 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ZINN REALTY MANAGEMENT, 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:

**MARK ZINN**

Name of Person

Firm/Company

**221 S. Federal Hwy., Suite #201**

Address

**Fort Lauderdale, FL 33301**

City/State and Zip Code

**Zinn@cyfr.com**

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

For further information concerning this matter, please call:

**Mark Zinn**

Name of Person

at ( **954** ) **763-5637**

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: ZINN REALTY MANAGEMENT, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000163365

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

221 S. FEDERAL HWY., SUITE 201

FORT LAUDERDALE, FL 33301

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

221 S. FEDERAL HWY., SUITE 201

FORT LAUDERDALE, FL 33301

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TALLAHASSEE, FLORIDA

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: MARK ZINN

b. No authority granted to: ROBERT G. ZINN

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

a. Granted to: MARK ZINN

b. No authority granted to: ROBERT G. ZINN

CASH AND TRADING S CORPORATION

By: [Signature], President  
Signature of authorized representative

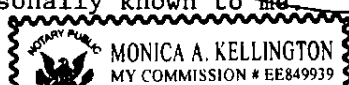
MARK ZINN, President  
Typed or printed name of signature

STATE OF FLORIDA  
COUNTY OF BROWARD

Before me personally appeared  
MARK ZINN as President of Cash and Trading S Corporation, on this 28 day of May, 2015,  
CR2E138 (2/14) who is personally known to me.

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)



[Signature]  
Monica A Kellington, Notary Public