

45000001529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE FLORIDA

JAN 28 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JMF REAL ESTATE 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:

Paul G. Schlichte, Esquire

Name of Person

Ray A. Schlichte, Jr., P.A.

Firm/Company

2134 Hollywood Boulevard

Address

Hollywood, FL 33020

City/State and Zip Code

PSchlichte@Schlichtelaw.com

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

For further information concerning this matter, please call:

Paul G. Schlichte

Name of Person

954 at ()

Area Code

923-4604

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

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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: JMF Real Estate LLC

SECOND: The Florida Document Number of the limited liability company is: L15000001529

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

2756 N. Dixie Highway

Wilton Manor, FL 33334

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

P. O. Box 341058

Brooklyn, NY 11234

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status position of a person in a company, whether as a member, transferee, manager, officer or otherwise or a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.


a. Granted to: Michael J. Ferraro

b. No authority granted to: _____

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

a. Granted to: _____

b. No authority granted to: _____


Signature of authorized representative

Michael J. Ferraro

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

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TALLAHASSEE FLORIDA