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COVER LETTER

TO: Registration Section Division of Corporations

Viv Realty, LLC SUBJECT:

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:

Daniel Weidenbruch, Esq.

Name of Person

Roetzel & Andress, LPA

Firm/Company

850 Park Shore Drive - Third Floor

Address

Naples, FL 34103

City/State and Zip Code

dweidenbruch@ralaw.com

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

For further information concerning this matter, please call:

Daniel Weidenbruch, Esq.	239	649-6200
· · · · · · · · · · · · · · · · · · ·	at ())
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

CR2E138 (2/14)

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: _____

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

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

975 6th Avenue South, Suite 105

Naples, Florida 34102

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

975 6th Avenue South, Suite 105

Naples, Florida 34102

a. Granted to:

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.

	b.	No authority granted to: Kathleen Stanton, Assistant Secretary
2. M	ayen a.	nter into other transactions on behalf of, or otherwise act for or bind, the company.
	b.	Kathleen Stanton Assistant Secretary

Typed or printed name of signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)

Signature of authorized representative