

L15 0000 37677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900272433039

04/30/15--01026--019 **55.00

FILED
15 APR 30 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Stivers MAY 06 2015

GASSMAN LAW ASSOCIATES, P.A.
ATTORNEYS AT LAW

ALAN S. GASSMAN **
KENNETH J. CROTTY ***^
CHRISTOPHER J. DENICOLO ***

- * LL.M. IN TAXATION
- + BOARD CERTIFIED LAWYER
WILLS, TRUSTS AND ESTATES
- *** LL.M. IN ESTATE PLANNING
- ^ BOARD CERTIFIED LAWYER IN TAX LAW

1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756
PHONE: (727) 442-1200
FAX: (727) 443-5829

Gassmanlawassociates.com

April 27, 2015

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

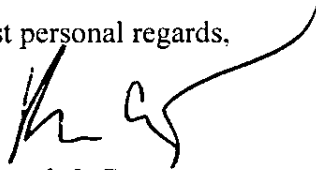
To Whom it May Concern:

Enclosed please find a Statement of Authority for filing for Andrews Investment Properties, L.L.C.

Additionally, please find a check in the amount of \$55.00 for the cost of filing and certifying the enclosed Statement of Authority. Please return the certified Statement of Authority to our office in the enclosed self-addressed, stamped envelope.

Please do not hesitate to contact my office if you have any questions with respect to the attached.

Best personal regards,



Kenneth J. Crotty

KJC:*cah
Enclosures
SASE

cc: Mr. and Mrs. Harry M. Andrews (w/encls. via email handrews45@comcast.net
and sandrews45@comcast.net)
Alan S. Gassman, Esq. (w/encls. via e-mail alan@gassmanpa.com)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANDREWS INVESTMENT PROPERTIES, L.L.C.
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:

Kenneth J. Crotty, Esq. _____
Name of Person

Gassman Law Associates, P.A. _____
Firm/Company

1245 Court Street, Suite 102 _____
Address

Clearwater, FL 33756 _____
City/State and Zip Code

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth J. Crotty, Esq. _____ at (727) 442-1200 _____
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

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: ANDREWS INVESTMENT PROPERTIES, L.L.C.

SECOND: The Florida Document Number of the limited liability company is: L15000037073

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

19112 Basin Street

Jupiter, FL 33469

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

19112 Basin Street

Jupiter, FL 33469

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; may give a mortgage on real property held in the name of the company; may satisfy a mortgage on real property held in the name of the company; may record a lease, option, and/or mechanics lien on real property held in the name of the company; may record any other incumbrance which would cloud or otherwise provide a detrimental impact on the real property held in the name of the company.

a. Granted to: Gassman Law Associates, P.A.

b. No person or entity other than the person(s) or entity(ies) listed under

Item 1(a) above, including no member, manager, transferee or otherwise of **ANDREWS**

INVESTMENT PROPERTIES, L.L.C., shall have any authority to take any of the actions

set forth in Item 1 above. The authority to take any of the actions set forth in Item 1

above is limited solely to the person(s) or entity(ies) listed under Item 1(a) above.

15 APR 30 PM 12:44
FILED
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

Amy C. Shatt
Witness

Carolyn R. B. Marster
Witness

[Signature]
Signature of Authorized Representative

Kenneth J. Crotty, Esquire
Typed or printed name of signature

STATE OF FLORIDA)
COUNTY OF PINELLAS)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared KENNETH J. CROTTY, ESQUIRE, known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed this Statement of Authority, or that I relied upon the following forms of identification of the above-named person: _____.

WITNESS, my official hand and seal this 27 day of April, 2015.

(SEAL)

[Signature]
Notary Public Signature

COURTNEY ANN HARDY
Printed Notary Signature



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

FILED
15 APR 30 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA