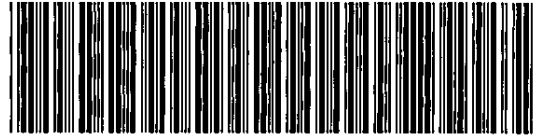


L150005315R



900290109999

09/15/16--01032--028 **55.00

(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

SEP 16 2016
S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 SEP 15 PM 2:45

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2401 W. OAK RIDGE ROAD 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:

ALFRED FELLERATH

Name of Person

2401 W. OAK RIDGE ROAD LLC

Firm/Company

2937 TINDALL ACRES ROAD

Address

KISSIMMEE, FL 34744

City/State and Zip Code

fredfellerath@gmail.com

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

For further information concerning this matter, please call:

ALFRED FELLERATH

Name of Person

407

Area Code

376-0890

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

FILED
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
16 SEP 15 PM 2:45

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: 2401 W. OAK RIDGE ROAD LLC

SECOND: The Florida Document Number of the limited liability company is: L15000053152

THIRD: The street address of the limited liability company's principal office is:
2937 TINDALL ACRES RD.
KISSIMMEE, FL 34744

The mailing address of the limited liability company's principal office is:
2937 TINDALL ACRES RD.
KISSIMMEE, FL 34744

16 SEP 15 PM 2:46
SECRETARY OF STATE
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.

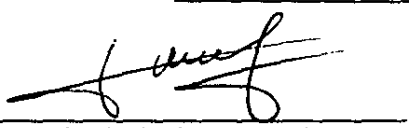
a. Granted to: ALFRED FELLERATH

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: ALFRED FELLERATH

b. No authority granted to: _____



Signature of authorized representative

ALFRED FELLERATH
Typed or printed name of signature

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