

L15000 115411

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 24 2015

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4875 West Boulevard, 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:

Michael D. Gentzle, Esq.

Name of Person

Coleman, Yovanovich & Koester, P.A.

Firm/Company

4001 Tamiami Trail North, Suite 300

Address

Naples, FL 34103

City/State and Zip Code

4875westblvd@gmail.com

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

For further information concerning this matter, please call:

Michael D. Gentzle, Esq.

Name of Person

at (239)

Area Code

435-3535

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: 4875 West Boulevard, LLC

SECOND: The Florida Document Number of the limited liability company is: L15000115411

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

4905 Scarsdale Road

Bethesda, MD 20816

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

4905 Scarsdale Road

Bethesda, MD 20816

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.

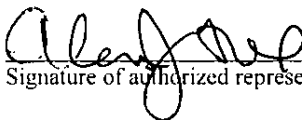
a. Granted to: Alison J. Fox, Manager

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: Alison J. Fox, Manager

b. No authority granted to: _____


Signature of authorized representative

Alison J. Fox

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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