

Division AUG. 6. 2015 2:05PM

JONES, FOSTER, 381 650 035

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Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS, P.A.
Account Number : 076077003231
Phone : (561)650-0471
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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15 AUG -6 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SUNSHINE LANE PARTNERS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 AUG -6 AM 9:17

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EXAMINER

AUG -7 2015

AUG. 6. 2015 3:06PM JONES FOSTER 561 650 0435

NO. 389315C P. 290658 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunshine Lane Partners, 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:

Larry B. Alexander, Jr., Esq.

Name of Person

Jones, Foster, Johnston & Stubbs, P.A.

Firm/Company

505 South Flagler Drive, Suite 1100

Address

West Palm Beach, FL 33401

City/State and Zip Code

ecapone@incien.com

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

For further information concerning this matter, please call:

Larry B. Alexander, Jr.

at (561) 659-3000
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

CR2B(38 (2/14)

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AUG. 6. 2015 3:06PM

JONES FOSTER 561 650 0435

NO. 3893 P. 3
H15000190658 3

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: Sunshine Lane Partners, LLC

SECOND: The Florida Document Number of the limited liability company is: L15000129146

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

315 Seabreeze Avenue

Palm Beach, FL 33480

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

315 Seabreeze Avenue

Palm Beach, FL 33480

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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: Becky L. Gochman, Manager and
Eileen M. Capone, Vice President

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: Becky L. Gochman, Manager and
Eileen M. Capone, Vice President

b. No authority granted to: _____



Signature of authorized representative

Larry B. Alexander, Jr.

Typed or printed name of signature

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

CR2E138 (2/14)

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