

L15000151954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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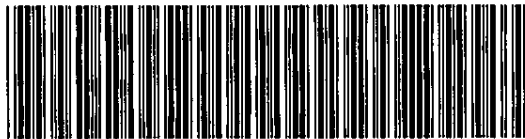
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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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: GULF OF MEXICO DRIVE, L.L.C.

SECOND: The Florida Document Number of the limited liability company is: L15000151954

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

1245 Court Street, Suite 102

Clearwater, FL 33756

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

1245 Court Street, Suite 102

Clearwater, FL 33756

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.

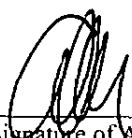
a. Granted to: JOSEPH E. ROCKLEIN, III, CPA and Gassman, Crotty & Denicolo, P.A.

- 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 **GULF OF MEXICO DRIVE, 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.

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OF FLORIDA

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Wayne Young
Witness
Christina Wittke
Witness



Signature of Authorized Representative

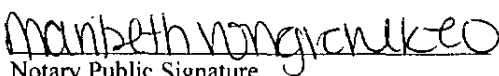
Alan S. Gassman, Esquire
Typed or printed name of signature

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 ALAN S. GASSMAN, ESQUIRE, known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed this Deed, or that I relied upon the following forms of identification of the above-named person: _____.

WITNESS, my official hand and seal this 21st day of October, 2015.

(SEAL) 
MARIBETH VONGVENEKOO
Notary Public - State of Florida
My Comm. Expires Nov 9, 2018
Commission # FF 141566


Notary Public Signature

maribeth vongvenekoo
Printed Notary Signature

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