L15000 183477

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(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:				
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COVER LETTER

TO: Registration Section Division of Corporations		
9703 DIXIE LLC		
SUBJECT: Name of Li	imited Liability Cor	nnany
ratio of the	inica siaointy cor	npany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filing	<u></u> ;.
Please return all correspondence concerning this ma	atter to the followin	g:
JACQUE HUTTOE		
Name of Person		-
9703 DIXIE LLC		
Firm/Company		_
1172 S. DIXIE HIGHWAY, SUITE 463		
Address	·	_
CORAL GABLES, FLORIDA 33146		
City/State and Zip Code		_
JACQUEHUTTOE@GMAIL.COM		
E-mail address: (to be used for future annu-	ual report notification	(no
For further information concerning this matter, plea	ase call:	
JACQUE HUTTOE	305 at (979-2421
Name of Person	Area Code	Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1). Florida Statutes, this limited authority:	, , ,
FIRST: The name of the limited liability company is: 9703	DIXIE LLC
SECOND: The Florida Document Number of the limited lia	bility company is:
THIRD: The street address of the limited liability company' 1172 S. DIXIE HIGHWAY, SUITE 463	's principal office is:
CORAL GABLES, FLORIDA 33146	shility company is: L15000183477 Sp. JUN 29 PM 1: 21
The mailing address of the limited liability comparents 1172 S. DIXIE HIGHWAY, SUITE 463	· ·
CORAL GABLES, FLORIDA 33146	
FOURTH: This statement of authority grants or sets limitati position of a person in a company, whether as a member, transperson on the following: 1. May execute an instrument transferring real pro a. Granted to: JACQUE HUTTOE	nsferee, manager, officer or otherwise or to a specific operty held in the name of the company.
b. No authority granted to: CHARLES H	IUTTOE
2. May enter into other transactions on behalf of, of a. Granted to: JACQUE HUTTOE	or otherwise act for or bind, the company.
b. No authority granted to: CHARLES H	IUTTOE
	JACQUE HUTTOE
Signature of authorized representative Filing Fee: Certified Copy:	Typed or printed name of signature \$25.00 : \$30.00 (optional)

CR2E138 (2/14)