

L16000017601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 22 2016

J SHIVER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOMES OF JAX, 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 S. Drews, Esq.

Name of Person

Drews Law Firm

Firm/Company

4455 Baymeadows Road, Suite 102

Address

Jacksonville, FL 32217

City/State and Zip Code

mdrews@drewslaw.net

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

For further information concerning this matter, please call:

Michael S. Drews

Name of Person

at (

904

Area Code

367-8700

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: HOMES OF JAX, LLC

SECOND: The Florida Document Number of the limited liability company is: L16000017601

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

3590 Eds Ct

Green Cove Springs, FL 32043

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

3590 Eds Ct

Green Cove Springs, FL 32043

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: _____

Nancy Rojas and Paul W. Altman, Jr., together

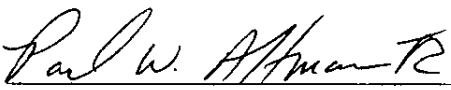
b. No authority granted to: _____

Nancy Rojas or Paul W. Altman, Jr., separately

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: _____

b. No authority granted to: _____


Signature of authorized representative

Paul W. Altman, Jr.
Typed or printed name of signature

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