

L16 0000 50409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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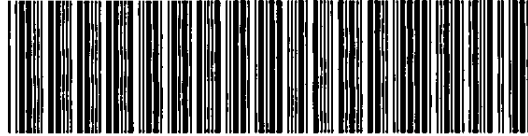
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 MAY 31 AM 7:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

JUN 02 2016
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shining Light 7, 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:

Shivon Patel, Esq.

Name of Person

The Principal Law Firm, P.L.

Firm/Company

7025 CR46A Suite 1071 PMB 353

Address

Lake Mary, FL 32746

City/State and Zip Code

shivon@principallaw.net

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

For further information concerning this matter, please call:

Shivon Patel

407

322-3003

at ()

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

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: Shining Light 7, LLC

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

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

522 S. Hunt Club Blvd., #158

Apopka, FL 32703

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

522 S. Hunt Club Blvd., #158

Apopka, FL 32703

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: Rhonda Haney

b. No authority granted to: Walter J. Haney, Jr.

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

a. Granted to: Rhonda Haney

b. No authority granted to: Walter J. Haney, Jr.


Signature of authorized representative

Rhonda Haney,
Trustee of the GLH Revocable Trust
Typed or printed name of signature

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