

h16 0000 73810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

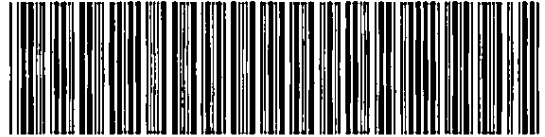
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG -5 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FL

AUG 15 2021
2:00 PM

LAW OFFICES OF
SANFORD M. REINSTEIN
PROFESSIONAL ASSOCIATION

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2890 Marina Mile Boulevard
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Fort Lauderdale, FL 33312

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Florida Supreme Court Certified Circuit Civil Mediator

Miami-Dade:
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Aug. 3, 2021

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St.
Suite 810
Tallahassee, FL 32303

Re: Enhanced Property Solutions LLC

Dear Sir:

Enclosed please find s Statement of Authority along with a check for \$25.00

Please process this.

Sincerely,


Sanford M. Reinstein, Esq.

SMR/ms
Enc.

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: ENHANCED PROPERTY SOLUTIONS LLC

SECOND: The Florida Document Number of the limited liability company is: L16000073810

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

385 BRASSIE DRIVE

LONGWOOD, FL 32750

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

385 BRASSIE DRIVE

LONGWOOD, FL 32750

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: TIMOTHY MALONE

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: TIMOTHY MALONE

b. No authority granted to: _____

Harry P. Malone
Signature of authorized representative

HARRY P. MALONE

Typed or printed name of signature

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

FILED
AUG - 5 AM 9:55
CLERK OF STATE
TALLAHASSEE, FL