## 117000 000 ld65

(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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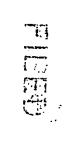
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2019 WAY -8 FD 12: 117



KLEWELX TLEMELX

## **COVER LETTER**

TO: Registration Section Division of Corporations		
UNDERWOOD RESIDENTIA	AL LLC	
Name of Li	mited Liability Com	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	atter to the following	:
RICHARD MUTARELLI, JR		
Name of Person		
SCHATT HESSER McGRAW		
Firm/Company		
328 NE 1ST AVENUE, SUITE 100		
Address		
OCALA, FL 34470		
City/State and Zip Code	<u>-</u>	
RICHARD@SHMFLA.COM		
E-mail address: (to be used for future annu	al report notification	1)
For further information concerning this matter, plea	se call:	
CHRIS UNDERWOOD	352 at (	400-1394
Name of Person	at ( Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registrat	GADDRESS: ion Section of Corporations

Tallahassee, Florida 32314

CR2E138 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301

## STATEMENT OF AUTHORITY

authority	r:	•	U1
FIRST:	The name of the limited liability company is: UNDERWOOD RESIDENTIAL L	LC	
	D: The Florida Document Number of the limited liability company is:	<u> </u>	
	The street address of the limited liability company's principal office is:  2 W GOLDEN STREET		
	BEVERLY HILLS, FL 34465		
	The mailing address of the limited liability company's principal office is:  2 W GOLDEN STREET		
	BEVERLY HILLS, FL 34465		
position (	H: This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise on the following:		ic
	May execute an instrument transferring real property held in the name of the company     a. Granted to:  CAROL UNDERWOOD		
	b. No authority granted to:	2019 HAY - 8	
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the compa		
	a. Granted to: CAROL UNDERWOOD	ឆ្ល	**************************************
	b. No authority granted to:		
///	chris under		
Signature	e of authorized representative  Filing Fee: \$25.00		

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)