

L17000007294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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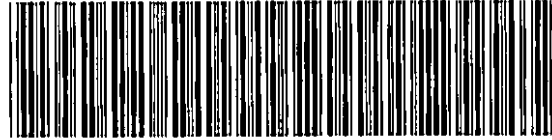
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JAN 11 PM 3:50

K. SALY  
JAN 11 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE VILLAS AT MASSEY RANCH, 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:

JOHN S. MASSEY

Name of Person

THE VILLAS AT MASSEY RANCH, LLC

Firm/Company

POST OFFICE BOX 949

Address

NEW SMYRNA BEACH, FL 32170

City/State and Zip Code

masseyproperties@cfl.rr.com

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

For further information concerning this matter, please call:

JOHN S. MASSEY

at ( 386 ) 427-7708

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: THE VILLAS AT MASSEY RANCH, LLC

SECOND: The Florida Document Number of the limited liability company is: L17000007294

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

635 AIRPARK ROAD

EDGEWATER, FL 32132

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

POST OFFICE BOX 949

NEW SMYRNA BEACH, FL 32170

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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.

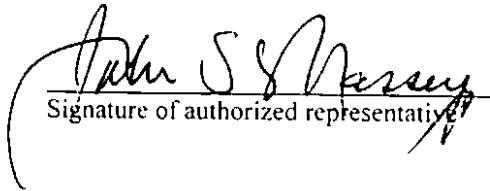
a. Granted to: JOHN S. MASSEY-authorized managing member  
of MASSEY FAMILY ENTERPRISES, LLC

b. No authority granted to: NO OTHER PARTY OR ENTITY

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

a. Granted to: JOHN S. MASSEY-authorized managing member  
of MASSEY FAMILY ENTERPRISES, LLC

b. No authority granted to: NO OTHER PARTY OR ENTITY

  
Signature of authorized representative

JOHN S. MASSEY

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)