## K17000069691

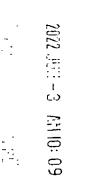
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

	istration Section ision of Corporations		
eup ir ew	ELIZABETH EVANS CUSTOM HOME	ES, LI.C	
SUBJECT:	Name of Limit	ed Liability Com	pany
Dear Sir or N	Aadam:		
The enclosed	Statement of Authority and fee(s) are sub	mitted for tiling.	
lease return	all correspondence concerning this matte	r to the following	ŗ.
Gavin David	l Magaziner		
	Name of Person		-
Magaziner L	.aw, P.A.		
	Firm/Company	<del>-</del>	-
1703 North	McMullen Booth Road		
	Address		•
Safety Harb	or		
	City/State and Zip Code		•
gavin@gmla	awfl.com		
E-r	nail address: (to be used for future annual	report notificatio	n)
For further is	nformation concerning this matter, please	call:	
Gavin David	i Magaziner	813 at (	3478017
	Name of Person	Area Code	Daytime Telephone Number
Ms	ailing Address:		Street Address:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

uniorny SIRST:	The name of the limited liability company is: ELIZABETH EVANS CUSTOM HOMES	. <u>Ma</u> JUII - 3	MH 10:
	The hame of the finited habitity company is:		- 
SECON	2: The Florida Document Number of the limited liability company is:		_
HIRD:	The street address of the limited liability company's principal office is: 6900 PHILIPS HIGHWAY, STE. 31		
	JACKSONVILLE, FL 32216		
	The mailing address of the limited liability company's principal office is: 6900 PHILIPS HIGHWAY, STE. 31		
	JACKSONVILLE, FL 32216		
osition ( erson or	4: 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 the following:  1. May execute an instrument transferring real property held in the name of the company	or to a specific	
	a. Granted to:		
	b. No authority granted to: Chris Stephens		
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comp  a. Granted to:  Elizabeth Evans; Chris Stephens	any.	
	b. No authority granted to:		

Signature of authorized representative

Gavin David Magaziner, Esq., AR

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)