

617 000150438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

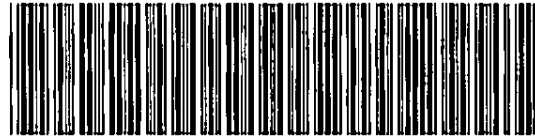
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COVER LETTER

TO: Registration Section
Division of Corporations

Sunny Condos llc
SUBJECT: _____
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:

Petrina Easton

Name of Person

Firm/Company

126 SE 26 Ave

Address

Boynton Beach Florida 33435

City/State and Zip Code

petrina_easton@hotmail.com

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

For further information concerning this matter, please call:

Petrina Easton

954

825-9113

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

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:

FIRST: The name of the limited liability company is: Sunny Condos LLC

LB 23 MH 9: 1

SECOND: The Florida Document Number of the limited liability company is: L17000150438

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

126 SE 26 Ave

Boynton Beach, Florida 33435

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

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.

Petrina Easton

a. Granted to: _____

Peter Easton

b. No authority granted to: _____

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

Petrina Easton

a. Granted to: _____

Peter Easton

b. No authority granted to: _____



Signature of authorized representative

Petrina Easton MGR

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**