

L17000 199529

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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STATEMENT OF AUTHORITY

1. **STELLA PROPERTY MANAGEMENT LLC**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STELLA PROPERTY MANAGEMENT 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:

David R. Roy

Name of Person

David R. Roy, P.A.

Firm/Company

4209 N. Federal Hwy

Address

Pompano Beach, FL 33064

City/State and Zip Code

assouline.tom@gmail.com

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

For further information concerning this matter, please call:

David R. Roy

954

784-2961

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: STELLA PROPERTY MANAGEMENT LLC

SECOND: The Florida Document Number of the limited liability company is: L17000199529

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

2858 N UNIVERSITY DR

CORAL SPRINGS, FL 33065

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

2858 N UNIVERSITY DR

CORAL SPRINGS, FL 33065

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status of 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.

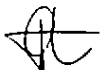
a. Granted to: _____

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: Christeen Ladd

b. No authority granted to: _____



Signature of authorized representative

Tom Assouline, Mgr

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE
TALLAHASSEE, FL