

L18 00000 27729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

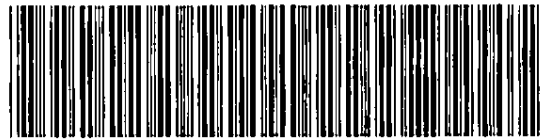
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Statement of
Auth.

JAN 03 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE DISTRICT AT CHURCH STREET 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:

ROBERT KELLY

Name of Person

KAAG TRUST

Firm/Company

534 WEST CHURCH ST

Address

ORLANDO FLORIDA 32805

City/State and Zip Code

Bob34711@yahoo.com

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

For further information concerning this matter, please call:

ROBERT KELLY at (407) 242-6888
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: THE DISTRICT AT CHURCH STREET LLC

SECOND: The Florida Document Number of the limited liability company is: 1.18000027729

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

534 WEST CHURCH ST ORLANDO FL 32805

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

534 WEST CHURCH ORLANDO FLORIDA 32805

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.

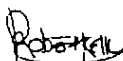
a. Granted to: ROBERT KELLY/ KAAG TRUST

b. No authority granted to: CASEY PRESTON

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

a. Granted to: ROBERT KELLY / KAAG TRUST/ EUGENE ARISTIL/
JORGE ZORRILLA

b. No authority granted to: CASEY PRESTON



Signature of authorized representative

ROBERT KELLY

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA