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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN

Account Number : 120020000140 Phone : (561)844-3600

: (561)842-4104 rax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

merola@ajmmgmt.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1094 MILITARY TRAIL, LLC

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## COVER LETTER

TO:	Registration Section Division of Corporations				
	1094 MILITARY TRAIL, LLC			_	
SUBJE	Name of Limited L	iability Company	·		
	or Madam:	<i>∴</i> .			
The end	losed Statement of Authority and fee(s) are submit	ted for tiling.			
Please r	eturn all correspondence concerning this matter to	the following:			
A. JO	HN MEROLA				
	Name of Person				
1094	MILITARY TRAIL, LLC				
-	Firm/Company				
1094	MILITARY TRAIL				
	Address	<del></del>		<u> </u>	
JUPI	TER, FLORIDA 33458	_	· ·	MAR 2	
	City/State and Zip Code	<del></del>	<u> </u>	Γœ	
7	E-mail address: (10 be used for future annual rep	CAM nort notification)		AH .9- 4	; í
For fu	other information concerning this matter, please cal	l:		9	
	OHN MEROLA at	(315)	559-1987		
	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.C. Box 6327 Tauchassee, Florida 32314

CR2E138 (2/14)

## STATEMENT OF AUTHORITY

1	to section 605.0302(1), Florida Statutes, this limited liability company submits the following:	ing statement of
FIRST:	The name of the limited liability company is: 1094 MILITARY TRAIL, LLC	
	· · · · · · · · · · · · · · · · · · ·	
	D: The Florida Document Number of the limited liability company is:	
THIRD:	The street address of the limited liability company's principal office is: 1094 MILITARY TRAIL	
	JUPITER, FLORIDA 33458	
	The mailing address of the limited liability company's principal office is: 1094 MILITARY TRAIL	· · · · · · · · · · · · · · · · · · ·
	JUPITER, FLORIDA 33458	- J
		∵ 20 <b>re</b> <b>re</b>
person (	1'H: This statement of authority grants of sets timinations of authority of a person in a company, whether as a member, transferee, manager, officer or otherwise on the following:  1. May execute an instrument transferring real property held in the name of the compara.  2. Granted to:  A. JOHN MEROLA, OFFICER	
	b. No authority granted to:	-
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the com a. Granted to:  A. JOHN MEROLA, OFFICER	pany.
	b. No authority granted to:	
<u>_</u>	A. JOHN MEROLA	A, OFFICER
Signat	Typed or printed name Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	o អសិម្រានពេន -

CR2E138 (2/14)