L18000216563

(Re	questor's Name)	
(Ad	dress)	
—————————(Ad	dress)	
٠٠		
(Cit	ty/State/Zip/Phor	ne #1
(5	.,,	,
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Γ		
Special Instructions to	Filing Officer:	
L		

Office Use Only



200366398032

06/01/21--01048--022 **100.00



COVER LETTER

Division of Corporations		
Gulf Breeze Shores LLC SUBJECT:		
	of Limited Liability Com	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to the following	:
Marie-Andree Cleary		
Name of Person	<u> </u>	
Orchard Management, Inc & Companies		
Firm/Company		
277 Locuse STreet, Ste. A		
Address		
Dover, NH 03820		
City/State and Zip Code		
meleary@orchardeo.com		
E-mail address: (to be used for future	annual report notification	1)
For further information concerning this matter,	, please call:	
Tina Smith	352 at (394-7408
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

TO:

Registration Section

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: Gulf Breeze Shores LLC **SECOND:** The Florida Document Number of the limited liability company is: 1.18000216563 THIRD: The street address of the limited liability company's principal office is: 4741 Atlantic Blvd. Ste. F Jacksonville, FL 32207 The mailing address of the limited liability company's principal office is: 277 Locust Street, Ste. A Dover NH 03820 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:______ Merideth Nagel; Tina Smith; Joni Story b. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company. a. Granted to: No authority granted to: ro of authorized representative

Filing Fee:

\$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)