

LI8000218421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

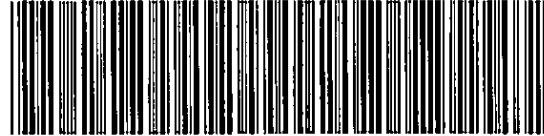
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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S. PRATHER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SUNSHINE FAMILY PARTNERS. 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:

ARNE JAMES GRINAKER, JR.

Name of Person

Law Office of A. James Grinaker

Firm/Company

1135 Pasadena Ave. S., Ste. 310

Address

South Pasadena, FL 33707

City/State and Zip Code

majent@msn.com

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

For further information concerning this matter, please call:

Arne "Jim" Grinaker at ( 727 ) 214-8972  
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.O. Box 6327  
Tallahassee, Florida 32314

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: Sunshine Family Partners, LLC

SECOND: The Florida Document Number of the limited liability company is: L18000218421

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

3660 7TH AVE, N.W.

NAPLES, FL 34120

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

3660 7TH AVE, N.W.

NAPLES, FL 34120

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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.

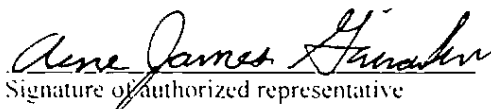
a. Granted to: MICHAEL A. JAINDL

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: MICHAEL A. JAINDL

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

Arne James Grinaker  
Typed or printed name of signature

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