

L18000260396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

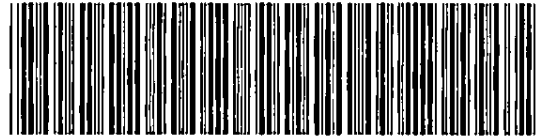
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/28/20--01007--025 **25.00

09/25/20--01010--004 **25.00 ✓

2022 SEP 25 PM 1:26

Statement of
Authority

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IFG OPPORTUNITY FUND, L.L.C.

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:

Anthony Gentile

Name of Person

Firm/Company

6151 LAKE OSPREY DRIVE SUITE 300

Address

SARASOTA, FL 34240

City/State and Zip Code

tgentile@useifg.com

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

For further information concerning this matter, please call:

Tony Gentile

941

2274102

Name of Person

at (_____) _____
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: _____
IFG OPPORTUNITY FUND, LLC

SECOND: The Florida Document Number of the limited liability company is: L18000260396

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

6151 LAKE OSPREY DRIVE SUITE 300

SARASOTA, FL 34240

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

6151 LAKE OSPREY DRIVE SUITE 300

SARASOTA, FL 34240

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: Anthony Gentile and Zeily Castrillo

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: Anthony Gentile and Zeily Castrillo

b. No authority granted to: _____



Signature of authorized representative

Anthony Gentile, Member

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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