

L19000058018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

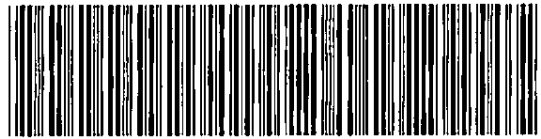
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000401917360

02/13/23--01014--023 **25.00

FILED
2023 FEB 13 PM 3:00
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Zan Property Solutions 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:

Hillary Zaniwski

Name of Person

Zan Property Solutions LLC

Firm/Company

1215 Williams Road

Address

New Smyrna Beach FL 32168

City/State and Zip Code

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

For further information concerning this matter, please call:

Hillary Zaniwski

386

290-9525

at ()

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: Zan Property Solutions LLC

SECOND: The Florida Document Number of the limited liability company is: L19000058018

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

1215 Williams Road

New Smyrna Beach, FL 32168

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

1215 Williams Road

New Smyrna Beach FL 32168

FILED
2023 FEB 13 PM 3:00
CLERK OF STATE
TALLAHASSEE, FL

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: Hillary Zaniwski

b. No authority granted to: N/A

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

a. Granted to: Hillary Zaniwski

b. No authority granted to: N/A


Signature of authorized representative

Hillary Zaniwski
Typed or printed name of signature

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