

L20000185184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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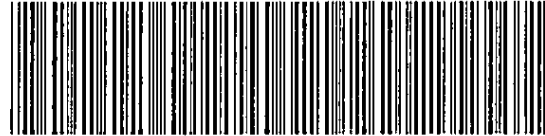
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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55.

**CORPORATE
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STATEMENT OF AUTHORITY

1. **HORIZONS SILVERLEAF DEVELOPMENT, LLC**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Horizons Silverleaf Development, 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:

Kristy Horan

Name of Person

Godbold, Downing, Bill & Rentz, P.A.

Firm/Company

222 W. Comstock Avenue, Suite 101

Address

Winter Park, FL 32789

City/State and Zip Code

khoran@gdb-law.com

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

For further information concerning this matter, please call:

Kristy Horan

407

647-4418

at (_____) _____

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: Horizons Silverleaf Development LLC 3-08

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

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

680 Fifth Avenue, 25th Floor

New York, NY 10019

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

680 Fifth Avenue, 25th Floor

New York, NY 10019

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: Ethan Leibowitz, in his capacity as Vice

President


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: Ethan Leibowitz, in his capacity as Vice

President

b. No authority granted to: _____


Signature of authorized representative

See attached Sig. Page

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

Signature Page

2020 JUL 10 AM 9:08

To

Statement of Authority

JEN 6 VA LLC

By: JEN 6 LP, a Delaware limited partnership,
its co-manager

By: JEN 6 GP LLC, a Delaware limited
liability company, its general
partner

By: 

Name: Ethan Leibowitz

Title: Vice President

HWTC Co-Invest LP

By: JEN 6 GP LLC, a Delaware limited
liability company, its general partner

By: 

Name: Ethan Leibowitz

Title: Vice President