

L20000212384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

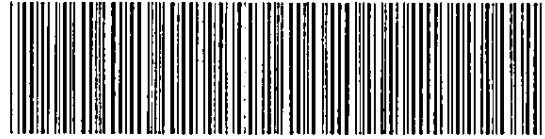
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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LLC  
Statement  
Authenticity  
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**CORPORATE  
ACCESS,  
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236 East 6th Avenue, Tallahassee, Florida 32303  
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**PICK UP:** 07/24/2020

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**STATEMENT OF AUTHORITY**

1. **JEN FLORIDA 39, LLC**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

*File 2nd*

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JEN Florida 39, 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: JEN Florida 39, LLC

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

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

1750 W. Broadway, Suite 111

Oviedo, FL 32765

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

1750 W. Broadway, Suite 111

Oviedo, FL 32765

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: Richard A. Jerman or Denver Marlow, each

in their 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: Richard A. Jerman or Denver Marlow,

each in their 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

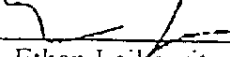
Certified Copy: \$30.00 (optional)

Signature Page  
To  
Statement of Authority

JEN 6 LB LLC,  
a Delaware limited liability company

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  
Its: Vice President