

L21000300363

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

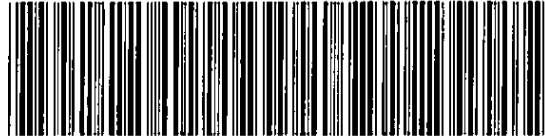
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

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**CORPORATE  
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**WALK IN**

**PICK UP:** 6/29 DANNY

**XX CERTIFIED COPY** \_\_\_\_\_

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**CUS** \_\_\_\_\_

**XX FILING**

**STATEMENT OF AUTHORITY** \_\_\_\_\_

*File 2<sup>nd</sup>*

**1. JEN FLORIDA 43 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: JEN Florida 43 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

Name of Person

at ( 407 ) 647-4418

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 43 LLC

SECOND: The Florida Document Number of the limited liability company is: 1-21000300363

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 and 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 and 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**

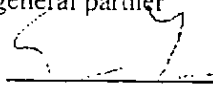
Certified Copy: **\$30.00 (optional)**

Signature Page  
To  
Statement of Authority

JEN 7 LB LLC,  
a Delaware limited liability company

By: JEN 7 LP,  
a Delaware limited partnership, its co-manager

By: JEN 7 GP LLC, a Delaware limited liability company,  
its general partner

By:   
Name: Ethan Leibowitz  
Its: President