L21000451396

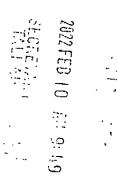
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COVER LETTER

		istration Section sion of Corporations	•		•	ır.	
SUBJEC	~1.•	734 Candice Ave, LLC			•		*
90 DOTA		Name of Lim	ited Lia	bility Co	nipany		_
Dear Sir	or N	fadam:					
The encl	osed	Statement of Authority and fee(s) are su	bmitted	for filing	g.		
Please re	turn	all correspondence concerning this matt	er to the	followir	ng:		
Luca Di	Nun	zio					
		Name of Person			_		
Dorcey	Law	Firm					
		Firm/Company					
10181 S	ix M	ile Mile Cypress Pkwy, Suite C					
		Address			_		
Fort My	ers, l	FL 33966					
		City/State and Zip Code			_		
support(@dlfi	registeredagent.com					
	E-n	nail address: (to be used for future annua	l report	notificati	on)	_	
For turth	ier in	nformation concerning this matter, please	call:				
Luca Di	Nun	zio	23 at (9	308-1	.073	
		Name of Person	A	rea Code	Da	ytime Te	dephone 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:

NAME OF LLC: 734 CANDICE AVE, LLC

FLORIDA LLC DOCUMENT NUMBER: L21000451396

PRINCIPAL OFFICE ADDRESS: 18241 Park Ridge Court, Fort Myers, FL 33908

MAILING ADDRESS (if different): 18241 Park Ridge Court, Fort Myers, FL 33908

MANAGER: Mary Ellen Fluharty

Below is the authority given to Mary Ellen Fluharty, Manager of the above-named LLC. If this person has unlimited authorization, the option "All Authorization to act on behalf of the LLC, including but not limited to the Options Listed Below (Unlimited Authority)" will be selected and will apply to Him/Her.

$\geq \leq$	All Authorization to act on behalf of the LLC, including but not limited to the Options
	Below (Unlimited Authority).
	He/She has Authority to Execute an Instrument Conveying (Sale/Lease) Real Property
Owned	d by the LLC.
	He/She has Authority to Purchase Property in the Name of the LLC.
	He/She has authority to Enter into Contract(s) for the Maintenance/ Improvement of Real
Proper	ty.
	He/She has authority to Open Bank Account(s) in Name of the LLC.
	He/She has authority to Close Bank Account(s) Owned by the LLC.
	He/She has authority to Use, Execute, Negotiate, and/or Assign LLC Debit/Credit Cards
and/or	other instruments of payment on behalf of the LLC.
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Personal
Proper	ty (Ex: Vehicles/Equipment).
	He/She has authority to Enter into Contract(s) for the Purchase of Personal Property (Ex:
Vehicl	les/Equipment).
	He/She has authority to Enter into Contract(s) for the Purchase of Supplies.
	He/She has authority to Enter into Contract(s) for the Purchase of Material(s).

He/She has authority to Enter into Contract(s) for the Purchase of Merchandise.

		He/She has authority to Enter into Contract(s) for the Purchase of Service	es.				
		He/She has authority to Enter into Contract(s) for the Sale of the LLC's	Supplic	?S.			
		He/She has authority to Enter into Contract(s) for the Sale of the LLC's	Materia	al(s).			
		He/She has authority to Enter into Contract(s) for the Sale of the LLC's	Mercha	ındise.			
		He/She has authority to Enter into Contract(s) for the Sale of the LLC's	Service	s.			
		He/She has authority to Enter into and maintain Contract(s) for Insurance	e Servi	ces on			
	behalf of the LLC.						
		He/She has authority to File Annual Reports with State of Florida.					
		He/She has authority to Amend Annual Reports with State of Florida.					
		He/She has authority to File Statement of Authority(s) with State of Flor	rida.				
		He/She has authority to Amend/Cancel/Renew Statement of Authority(s) in Sta	te of			
	Florida	l.					
		He/She has authority to Amend Articles of Organization.					
If more space was needed, a separate sheet(s) of paper will be attached to the back of this form.							
	734 Cz	ANDICE AVE, LLC;	, 15 , 15 	2022 FEB 10			
	Ву:	Mary Ellen Flicharty Jame: MARY EITEN FlichARTY) AT 0:			
	Print N	lame: MARY EIIEN FlukARTY		9: ાં			
	Title: _	manager					

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