

L21000454405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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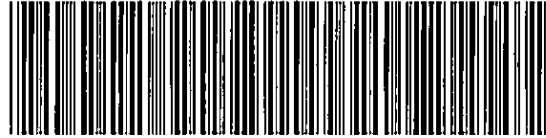
(Business Entity Name)

(Document Number)

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

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**WALK IN**

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☒ **CERTIFIED COPY** \_\_\_\_\_  
☒ **PHOTOCOPY** \_\_\_\_\_  
☐ **CUS** \_\_\_\_\_  
☒ **FILING** STATEMENT OF AUTHORITY

1. JEN FLORIDA 45 LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #) *File 2nd*
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 45 LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fec(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 45 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 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: \_\_\_\_\_

Ethan Leibowitz  
Signature of authorized representative

See attached Sig. Page

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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SECRET  
TALLAHASSEE  
FBI

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: Ethan Leibowitz  
Name: Ethan Leibowitz  
Its: President

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