

122000017567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

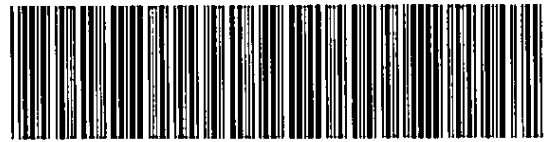
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FL

Stmt Auth

FEB 17 2022  
I ALBRITTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 17 De Villiers, 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:

Dara S. Siegel, Esq.

\_\_\_\_\_  
Name of Person

Siegel & Siegel, PA

\_\_\_\_\_  
Firm/Company

1600 S. Dixie Highway, Suite 300

\_\_\_\_\_  
Address

Boca Raton, FL 33432

\_\_\_\_\_  
City/State and Zip Code

DSiegel@teamsiegel.com

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

For further information concerning this matter, please call:

Dara S. Siegel, Esq.

561 620-8200  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone 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:

**FIRST:** The name of the limited liability company is: 17 De Villiers, LLC.

**SECOND:** The Florida Document Number of the limited liability company is:  
L22000017567.

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

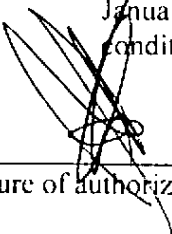
1600 South Dixie Highway, Suite 300  
Boca Raton, FL 33432

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

1600 South Dixie Highway, Suite 300  
Boca Raton, FL 33432

**FOURTH:** This statement of authority sets limitations of authority on all persons (whether natural persons, trusts, or business entities) having the status or position of a person in 17 De Villiers, LLC, whether as a member, transferee, manager, officer or otherwise, on the following:

1. No persons having the status or position in 17 De Villiers, LLC, as a member, transferee, manager, officer, authorized representative or otherwise may execute an instrument transferring real property or any interest in real property held in the name of the company without the prior express written consent of IRENE CEIL KESSLER, as TRUSTEE of the IRENE CEIL KESSLER REVOCABLE TRUST, dated January 26, 2011, or her successor or assigns, in accordance with the terms and conditions of that certain Pledge Agreement, dated February 3, 2022.
2. No persons having the status or position in 17 De Villiers, LLC, as a member, transferee, manager, officer, authorized representative or otherwise may execute an instrument issuing or transferring any membership interests in the company without the prior express written consent of IRENE CEIL KESSLER, as TRUSTEE (or successor trustee) of the IRENE CEIL KESSLER REVOCABLE TRUST, dated January 26, 2011, or her successor or assigns, in accordance with the terms and conditions of that certain Pledge Agreement, dated February 3, 2022.

  
\_\_\_\_\_  
Signature of authorized representative

Seymour J. Siegel, Manager  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FL

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