h22000021218

| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ry/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Na | me) |
| (Do | cument Number) |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
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| | | |

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FL

MAY 26 PM L: (

COVER LETTER

| | vision of Corporations | | |
|----------------|--|-------------------------|--------------------------|
| SUBJECT: | 1011 SE 47th Terrace, LLC | | |
| | | imited Liability Com | pany |
| Dear Sir or I | Madam: | | |
| The enclosed | d Statement of Authority and fee(s) are | submitted for filing. | |
| Please return | all correspondence concerning this m | natter to the following | . |
| Luca Di Nu | nzio | | |
| | Name of Person | | |
| Dorcey Law | Firm | | |
| • | Firm/Company | | |
| 10181 Six M | file Mile Cypress Pkwy, Suite C | | |
| | Address | | |
| Fort Myers, | FL 33966 | | |
| | City/State and Zip Code | | |
| support@dlt | registeredagent.com | | |
| E-n | nail address: (to be used for future ann | ual report notification | 1) |
| For further in | nformation concerning this matter, plea | ase call: | |
| Luca Di Nur | nzio | 239 at (| 308-1073 |
| | 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:

NAME OF LLC: 1011 SE 47TH TERRACE, LLC

FLORIDA LLC DOCUMENT NUMBER: L22000021218

PRINCIPAL OFFICE ADDRESS: 4517 SW 9th Ave, Cape Coral, FL 33914

MAILING ADDRESS (if different): 4517 SW 9th Ave, Cape Coral, FL 33914

MANAGER: Andrew Gray

to Him/Her.

Property (Ex: Vehicles/Equipment).

SECUL DAKY OF STATE
TATE AHASSEE, FI

Below is the authority given to Andrew Gray, 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

| d | All Authorization to act on behalf of the LLC, including but not limited to the Options |
|----------|---|
| Listed | Below (Unlimited Authority). |
| | He/She has Authority to Execute an Instrument Conveying (Sale/Lease) Real Property |
| Ownec | I 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

He/She has authority to Enter into Contract(s) for the Purchase of Personal Property (Ex:

Vehicles/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 Services. |
|---------|---|
| | He/She has authority to Enter into Contract(s) for the Sale of the LLC's Supplies. |
| | He/She has authority to Enter into Contract(s) for the Sale of the LLC's Material(s). |
| | He/She has authority to Enter into Contract(s) for the Sale of the LLC's Merchandise. |
| | Hc/She has authority to Enter into Contract(s) for the Sale of the LLC's Services. |
| | He/She has authority to Enter into and maintain Contract(s) for Insurance Services 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 Florida. |
| | He/She has authority to Amend/Cancel/Renew Statement of Authority(s) in State of |
| Florida | i. |
| | He/She has authority to Amend Articles of Organization. |
| If more | e space was needed, a separate sheet(s) of paper will be attached to the back of this form. |

1011 SE 47TH TERRACE, LLC;

Print Name: Andrew Gray

Title: Manager

2022 HAY 26 PM 4: 02 SECRLIBARY OF SHATE TALLAHASSEE, FL