LZZ0000 59180

(Re	equestor's Name)	-
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2022 HAR 31 PM 12: 26 SECTION IN SEE STATE

COVER LETTER

Liability Company
itted for filing.
the following:
port notification)
l:
239 308-1073 Area Code Daytime Telephone Number
Area Code Daytime Telephone Number
Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee
iii

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E138 (2/14)

Tallahassee, FL 32314

TO:

Registration Section

STATEMENT OF AUTHORITY

FILED

2022 MAR 3 | PM 12: 26

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority: $\frac{1}{16} \sum_{i=1}^{n} \frac{1}{16} \sum_{i=1}^{n} \frac{1$

NAME OF LLC: 6481 ARAGON #304, LLC

FLORIDA LLC DOCUMENT NUMBER: <u>L220</u>00059180

PRINCIPAL OFFICE ADDRESS: 12601 Mastique Beach Blvd Apt. 501, Fort Myers, FL 33908

MAILING ADDRESS: 12601 Mastique Beach Blvd Apt. 501, Fort Myers, FL 33908

MANAGER: Elizabeth Diane Scoggins

Below is the authority given to Elizabeth Diane Scoggins, 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.

\bowtie	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
Owned	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	es/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).

Page 1 of 2
Statement of Authority for Elizabeth Diane Scoggins

	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.		
	He/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		
Florid	a.		
	He/She has authority to Amend Articles of Organization.		
If mor	re space was needed, a separate sheet(s) of paper will be attached to the back of this form.		
6481 ARAGON #304, LLC;			
DocuSigned by:			
By: JASON SCOGGINS			
∠ . ر ∞	3286EBB6FG4F480		
Print Name: Jason T. Scoggins			
Title: Manager			