

Florida Department of State
Division of Corporations
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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
 Account Number : I19990000006
 Phone : (407)425-7010
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ARCADIA ESTATES MHC, LLC

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MAY 15 2023
 K. Brumbler

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARCADIA ESTATES MHC, 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:

D. SCOTT BAKER, ESQUIRE

Name of Person

ZIMMERMAN, KISER & SUTCLIFFE, P.A.

Firm/Company

315 E ROBINSON STREET SUITE 600

Address

ORLANDO, FLORIDA 32801

City/State and Zip Code

REGISTEREDAGENT@ZKSRASERVICES.COM

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

For further information concerning this matter, please call:

Jessica Snyder, Corporate Paralegal

407

425-7010

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: ARCADIA ESTATES MHC, LLC

SECOND: The Florida Document Number of the limited liability company is: L22000469029

THIRD: The street address of the limited liability company's principal office is:
315 E. ROBINSON STREET, SUITE 600
ORLANDO, FLORIDA 32801


The mailing address of the limited liability company's principal office is:
315 E. ROBINSON STREET, SUITE 600
ORLANDO, FLORIDA 32801

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: _____
 - 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: D. Scott Baker, Esq., as authorized signatory for the company
for purposes of applying for mobile home & recreational vehicle titles only
 - b. No authority granted to: _____

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Signature of authorized representative

Matthew Fossman
Typed or printed name of signature

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