La 3000 49a 3a 5

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Rachel M. Miller Attorney at Law 30 S Spring Street Pensacola, FL 32502 Rmiller@esclaw.com (850) 433-6581 | esclaw.com

February 16, 2024

VIA MAIL DELIVERY

Florida Division of Corporations PO Box 6327 Tallahassee, Florida 32314

Re: Statement of Authority - New Leaf Renovations, LLC

Our File: 19497-161924

To Whom It May Concern:

Enclosed is our Check#157442 in the amount of \$25.00 for the Statement of Authority for New Leaf Renovations, LLC

Sincerely,

Alisa Kiker for Rachel M. Miller

/ajk

Enclosures

COVER LETTER

Div	rision of Corporations			
SUBJECT:	New Leaf Renovations LLC			
SOBJECT.	Name of L	imited L	iability Compa	ny
Dear Sir or M	vladam:			
The enclosed	d Statement of Authority and fee(s) are	submitt	ed for filing.	
Please return	all correspondence concerning this ma	atter to	he following:	
Dustin Th	nurman			
	Name of Person			
New Lea	f Renovations LLC			
	Firm/Company			
6810 Bris	sas Way			
	Address			
Pensaco	la, FL 32526			
	City/State and Zip Code			
E-1	mail address: (to be used for future ann	ual repo	rt notification)	
For further i	nformation concerning this matter, plea	ase call:		
Dus	fin Thurman	a1 (850 i	602-0626
-	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

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

TO:

Registration Section

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

ECOND: The Flo	rida Document Number of the limited liability company is: L230004	_
	address of the limited liability company's principal office is:	
Pensac	ola, FL 32526	
	ing address of the limited liability company's principal office is:	
Pensac	ola, FL 32526	
1. May e a.	xecute an instrument transferring real property held in the name of the c Granted to: Dustin Thurman - Authorized Member	ompany.
b.		
	No authority granted to:	
2. May o	No authority granted to: Inter into other transactions on behalf of, or otherwise act for or bind, the Granted to: Dustin Thurman - Authorized member	e contrany

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)