

(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:				
J. HORNE JUL 15 2004				
11/ 12 Mr.				

Office Use Only



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2024 JUNES - P.11/2: 0

COVER LETTER

TO:		tistration Section rision of Corporations		
SUBJI		PBFH LLC		
		Name	of Limited Liability Com	pany
Dear S	ir or !	Madain:		
The en	closed	I Statement of Authority and feet	s) are submitted for filing.	
Please	returi	all correspondence concerning the	his matter to the following	:
Robert	Harr	ell		
		Name of Person		
PBFII	LLC			
		Firm/Company		
13356	57th	Place North		
		Address		
West F	alm l	Beach, FL 33411		
		City/State and Zip Code		
robert(i bptj	1.00		
	E-r	mail address: (to be used for future	e annual report notification	1)
For fur	ther i	nformation concerning this matter	, please call:	
Robert	Harr	ell	\$63 at (447-7168
		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

authority:	eccon 605,0302(1). Florida Statutes, this limited liability company submits the following	
FIRST: The	me of the limited liability company is:	
SECOND: T	Lie Florida Document Number of the limited liability company is:	- 19 (S)
THIRD: The	e street address of the limited liability company's principal office is: 1 Commerce Lane Suite 8	2.00
Jupi	iter, FL 33458	
	ne mailing address of the limited liability company's principal office is: 1 Commerce Lane Suite 8	
Jupi	iter, FL 33458	
person on the	person in a company, whether as a member, transferee, manager, officer or otherwise of following: May execute an instrument transferring real property held in the name of the company a. Granted to:	
	600 S. Dixie Hwy Apt 604, West Palm Beach, FL 33401	
	b. No authority granted to:	
. 2.	May enter into other transactions on behalf of, or otherwise act for or bind, the comparation of the compara	my.
	600 S. Dixie Hwy Apt 604, West Palm Beach, FL 33401	
	b. No authority granted to:	
<i>D</i>	A A Par Harrell	
Signature of	authorized representative Filing Fee: \$25.00 Typed or printed name of	signature

Certified Copy: \$30.00 (optional)

CR2E138 (2.14)