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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

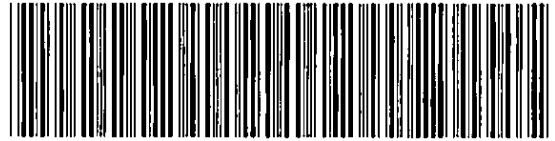
(Business Entity Name)

(Document Number)

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U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JAZZI JEWELRY COLLECTION LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOANN SKAGGS

Name of Person

JAZZI JEWELRY COLLECTION LLC

Firm/Company

307 Bahia Circle

Address

Ocala, FL 34472

City/State and Zip Code

jazzijewelrycollectionllc@yahoo.com

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

For further information concerning this matter, please call:

Joann Skaggs

352

4449965

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: JAZZI JEWELRY COLLECTION LLC

SECOND: The Florida Document Number of the limited liability company is: L24000262707

THIRD: The street address of the limited liability company's principal office is:

307 Bahia Circle

The mailing address of the limited liability company's principal office is:

307 Bahia Circle Ocala, FL 34472

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.

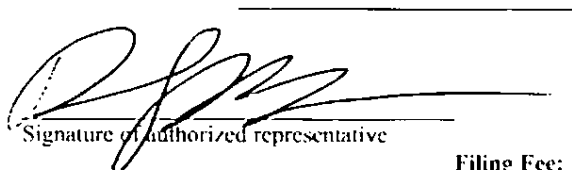
a. Granted to: Joann Skaggs

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: Joann Skaggs

b. No authority granted to: _____


Signature of authorized representative

Billy Skaggs

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

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2021-03-27 PM 3:01
CLERK OF CIRCUIT COURT
IN AND FOR FLORIDA