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	(Requestor's Name)			
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PICK-U	P WAIT MAIL			
	(Business Entity Name)			
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SECRETARY OF SHAIR

MAR 24 2016 BRUCE

COYER LETTER

TO: Registration Section Division of Corporations		
JUDITH SELZ #2, L.C.		
Name of L	imited Liability Company	
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
ROBERT E. SELZ		
Name of Person		
JUDITH SELZ #2, L.C.		
Firm/Company		
717 LAYNE BLVD.		
Address		
HALLANDALE, FL 33009		
City/State and Zip Code		
JUDYSELZ@BELLSOUTH.NET		
E-mail address: (to be used for future ann	nual report notification)	2016 1
For further information concerning this matter, ple	ease call:	AND HE
ROBERT E. SELZ	954 454-5568	AR 23 F
Name of Person	Area Code Daytime Telephor	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations	ne Number U F 27

P.O. Box 6327

Tallahassee, Florida 32314

Clifton Building

2661 Executive Center Circle Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

authority:	section 605.0302(1), Florida Statutes, this limited liability company submits the follow	ving statement	of
FIRST: T	he name of the limited liability company is: JUDITH SELZ #2, L.C.		
SECOND:	The Florida Document Number of the limited liability company is: Z00411		
THIRD: 1	The street address of the limited liability company's principal office is: 17 LAYNE BLVD., HALLANDALE BEACH, FL 33009	-	
	The mailing address of the limited liability company's principal office is: 17 LAYNE BLVD., HALLANDALE BEACH, FL 33009	-	
position of	This statement of authority grants or sets limitations of authority on all persons having a person in a company, whether as a member, transferee, manager, officer or otherwise he following: May execute an instrument transferring real property held in the name of the compana. Granted to: ROBERT E. SELZ and JUDITH L. SELZ	or to a specific	e
	b. No authority granted to: KAREN A. SELZ	2016 MAR 23 P 4: 2: SECRETARY OF STATE TALLAHASSEE, FLORING	
2.	May enter into other transactions on behalf of, or otherwise act for or bind, the compa. Granted to: ROBERT E. SELZ and JUDITH L. SELZ	· 21	
	b. No authority granted to: KAREN A. SELZ	-	
Signature o	Typed or printed name of Certified Copy: \$30.00 (optional)	SEL of signature	2