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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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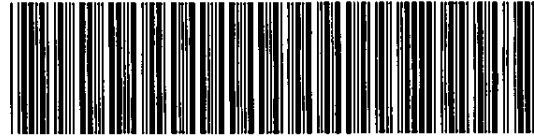
(Business Entity Name)

(Document Number)

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FEB 17 2014  
CLINE

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Balbow, 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:

**Lynn B. Aust**

Name of Person

**Lynn B. Aust, PL**

Firm/Company

**1220 E. Livingston St.**

Address

**Orlando, FL 32803**

City/State and Zip Code

**doveattorney@austlaw.biz**

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

For further information concerning this matter, please call:

**Lynn B. Aust**

Name of Person

at ( **407** ) **447-5399**

Area Code

Daytime Telephone Number

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2014 FEB 14 AM 11:22  
STATE OF FLORIDA  
TALLAHASSEE

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

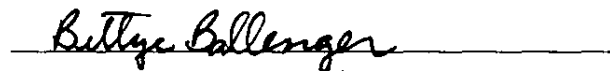
**STATEMENT OF AUTHORITY**

We, James Ballenger and Bettye Ballenger, sole Authorized Members for Balbow, LLC (hereinafter "Company"), with the principal and mailing address of 10317 Down Lakeview Circle, Windermere, FL 34786, state the authority granted for the following person(s) and position(s):

1. James Ballenger, Authorized Member of the Company, has the absolute authority to:
  - a. Execute an instrument transferring real property held in the name of the Company; and
  - b. Enter into other transactions on behalf of, or otherwise act for or bind, the Company.
2. Bettye Ballenger, Authorized Member of the Company, has the absolute authority to:
  - a. Execute an instrument transferring real property held in the name of the Company; and
  - b. Enter into other transactions on behalf of, or otherwise act for or bind, the Company.

This Statement of Authority is effective as of 2<sup>ND</sup> day of FEB 2014.

  
James Ballenger, Authorized Member

  
Bettye Ballenger, Authorized Member

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TALLAHASSEE, FLORIDA