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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : DRIVER, MCAFEE, PEEK & HAWTHORNE, P.L.

Account Number : I20020000137

Phone

: (904)301-1269

Fax Number

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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: Block Five LLC
SECOND: The Florida Document Number of the limited liability company is: L14000162854
THIRD: The street address of the limited liability company's principal office is: One Independent Drive, Suite 1200
Jacksonville, FL 32202
The mailing address of the limited liability company's principal office is: PO Box 550860
Jacksonville, FL 32255-0860
FOURTH: This statement of authority grants or sate limitations of authority on all nevenus having the status or
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: Matthew S. McAfee, Vice President
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: Matthew S. McAfee, Vice President
b. No authority granted to:
Block Five, LLC By: North Platte, LLC, its Manager By: Contegs Business Services, LLC, its Manager By: Matthew S. McAfee Matthew S. McAfee
Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E138 (2/14)