U18 0000 27252

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(R2784, 23--318)(4--63), (*****), (





COVER LETTER

Crocker Property	Acquisitions, LLC		
SUBJECT: Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Statement of Auth	ority and fee(s) are submitted fo	or filing.	
Please return all correspondence	concerning this matter to the fo	ollowing:	
Richard B Crocker			
Name	of Person		
Crocker Property Acquisitions,	LLC		
Firm/C	ompany		
2457 Orsota Cir.			
Addi	ess		
Ococe, FL 34761			
City/State and	Zip Code		
rick@rickcrocker.com			
E-mail address: (to be	used for future annual report no	tification)	
or further information concern	ng this matter, please call:		
Richard B Crocker	407 at (401-8289	
Name of Person		Code Davtime Telephon	e 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 authority:	
FIRST: The name of the limited liability company is: Crocker Property	erty Acquisitions, LLC
SECOND: The Florida Document Number of the limited liability con	mpany is: L18000027252
THIRD: The street address of the limited liability company's princip 2457 Orsota Cir., Ococc, FL 34761	al office is:
The mailing address of the limited liability company's prin 2457 Orsota Cir., Ocoee, FL 34761	cipal office is:
FOURTH: This statement of authority grants or sets limitations of at position of a person in a company, whether as a member, transferee, n person on the following: 1. May execute an instrument transferring real property hel a. Granted to: Melanie L Crocker	thority on all persons having the status or nanager, officer or otherwise or to a specific d in the name of the company.
b. No authority granted to:	:
May enter into other transactions on behalf of, or otherwal a. Granted to: Melanie L. Crocker	
b. No authority granted to:	
Richard & Crocker	Richard B Crocker
Signature of authorized representative Filing Fee: \$25.00	Typed or printed name of signature

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)