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(Requestor's Name) (Address) (Address)	300299035123	
(City/State/Zip/Phone #)	300299035123 05/09/1701021019 **25.00	
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COVER LETTER

TO: **Registration Section Division of Corporations**

BOGGY CREEK ESTATE, L.C.

SUBJECT:

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:

JOSE A. REY

Name of Person

BOGGY CREEK ESTATES, L.C.

Firm/Company

976 LAKE BALDWIN LANE, SUITE 102

Address

ORLANDO, FLORIDA 32814

City/State and Zip Code

AREY@REYGROUPINDUSTRIES.COM

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

For further information concerning this matter, please call:

BETH GITTES	407	281-6666 EXT 203
	at ()
	Auro Cada	Destine Telephere Number

Name of Person

Area Code

Daytime Telephone Number

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

CR2E138 (2/14)

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: BOGGY CREEK, ESTATES, L.C.

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

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

976 LAKE BALDWIN LANE, STE 102

ORLANDO, FLORIDA 32814

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

976 LAKE BALDWIN LANE, STE 102

ORLANDO, FLORIDA 32814

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 total specific person on the following:

May execute an instrument transferring real property held in the name of the company.
a. Granted to: <u>ALEXANDER G. REY</u>

с'n

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 : ALEXANDER G. REY

b. No authority granted to: _____

	JOSE A. REY
Signature of authorized representative Filing Fee:	Typed or printed name of signature \$25.00
	\$30.00 (optional)

CR2E138 (2/14)