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AUG 1 2 2015 J SHIVERS

CRAMER, PRICE & de ARMAS, P.A.

ATTORNEYS AT LAW

1411 EDGEWATER DRIVE, SUITE 200 ORLANDO, FLORIDA 32804

CHARLES W. CRAMER*
R. DAVID de ARMAS
STEPHEN H. PRICE
CARRIE L. GALBRAITH**
CHAD A. SHIMEL

7

(407) 843-3300 FAX (407) 843-6300 www.cramerprice.com

*ALSO ADMITTED IN GEORGIA

**ALSO ADMITTED IN WASHINGTON, D.C.

OF COUNSEL: PHILIP A. THARP 1939-2003

August 5, 2015

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Statement of Authority

Knight Family-Keys, LLC CPD file reference: 15093

Dear Registration Representative:

Please find enclosed our firm check in the amount of \$55.00 for one (1) certified copy of the Statement of Authority for the Knight Family-Keys, LLC limited liability company.

Also enclosed is a return envelope for your convenience in returning the certified copy back to this office.

Thank you for your assistance and cooperation in this request.

Yours very truly,

CHADA SHIMEI

CAS/drs enclosures

COVER LETTER

TO:	Registration Section Division of Corporations			
Clibic	Knight Family-Keys, LLC			
SUBJE		Limited 1	Liability Comp	pany
Dear Si	r or Madam:			
The end	closed Statement of Authority and fee(s) are	re submit	ted for filing.	•
Please r	eturn all correspondence concerning this r	natter to	the following:	
Patric	k J. Knight			
	Name of Person		 	
Knigh	t Family-Keys, LLC			
	Firm/Company			
1900	Adams Drive			
	Address	_		
Maitla	and, FL 32751			
	City/State and Zip Code			
patjkr	night@aol.com			
	E-mail address: (to be used for future an	nual rep	ort notification	1)
For furt	her information concerning this matter, pl	ease call	:	
Patrio	ck J. Knight	at (407	509-6842
	Name of Person	u. ,	Area Code	Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations : 6327 see, Florida 32314

Tallahassee, Florida 32301

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: Knight Family-Keys, LLC			-				
SECON	D: The Florida Document Number of the limited liability company is: L01000014036	3		_				
	The street address of the limited liability company's principal office is: 1900 Adams Drive							
	Maitland, FL 32751							
	The mailing address of the limited liability company's principal office is: 1900 Adams Drive							
	Maitland, FL 32751							
position	H: This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise in the following: 1. May execute an instrument transferring real property held in the name of the compana. Granted to: Patrick J. Knight	or total spectrum.	15 ALES PM : 04	Service Servic				
	b. No authority granted to:	-						
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comp a. Granted to: Patrick J. Knight	- oany. -						
	b. No authority granted to:	-						
1	Patrick J. Knight	-						

Filing Fee:

\$25.00 Certified Copy: \$30.00 (optional)

Typed or printed name of signature

CR2E138 (2/14)

Signature of authorized representative