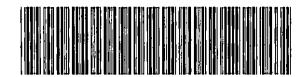
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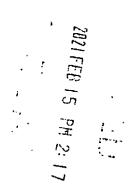
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O SIMMONS APR 05 2021

COVER LETTER

	Blanco Investments LLC		
SUBJECT	:	me of Limited Liability Com	pany
Dear Sir o	Madam:		
The enclos	ed Statement of Authority and fo	ee(s) are submitted for filing.	
Please retu	rn all correspondence concernin	g this matter to the following	:
John M. N	lorgan		
	Name of Person		
Attorney a	u Law		
· **	Firm/Company		
9001 Dani	els Parkway, Ste 201		
	Address		
Fort Myer	s, Florida 33912		
	City/State and Zip Code		
jmmorgan	@morgantitle.com		
F	-mail address: (to be used for fu	ture annual report notification	n)
For further	information concerning this ma	itter, please call:	
John M. N	torgan	239 at (454-0572
	Name of Person	Area Code) Daytime Telephone Number

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

STATEMENT OF AUTHORITY

Pursuant to authority:	to section 605.0302(1). Florida Statutes, this limited liability company su	bmits the following statement of
FIRST: T	The name of the limited liability company is: Blanco Investments LLC	
SECOND	D: The Florida Document Number of the limited liability company is:	4000056564
	The street address of the limited liability company's principal office is: 11840 Lacy Lane	
- - -	Fort Myers, Florida 33966	2
-	The mailing address of the limited liability company's principal office i	s: J
- -	Fort Myers, Florida 33966	· 5
person on	of a person in a company, whether as a member, transferee, manager, offin the following: 1. May execute an instrument transferring real property held in the nam a. Granted to: Edgar Blanco Kerri Blanco	e of the company.
	b. No authority granted to:	
2	2. May enter into other transactions on behalf of, or otherwise act for o a. Granted to : Edgar Blanco Kerri Blanco	r bind, the company.
	b. No authority granted to:	
alos	Edgar Bla	neo
Signature	of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	r printed name of signature