NOS 00000 163 84

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of State	tus			
Special Instructions to Filing Officer:				





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02/04/22--01016--022 **\$5.00

2022 FEB -4 (CHIO: 59 SECRETATION 17

COVER LETTER

10;	Division of Corporations			
	HUCKLEBERRY PARTNERS, I.	I.C		
SUBJ				
	Name o	of Limited Liability C	ompany	
Dear S	ir or Madam:			
The en	iclosed Statement of Authority and fee(s)) are submitted for fili	ng.	
Please	return all correspondence concerning this	is matter to the follow	ing:	
H. Jam	nes Herborn, III			
	Name of Person			
Huckle	eberry Partners, LLC			
	Firm/Company			
3801 A	Avalon Park East Boulevard, Suite 200			
	Address			
Orland	lo, Florida 32828			
	City/State and Zip Code	<u> </u>		
jimh 12	263@comeast.net			
	E-mail address: (to be used for future	annual report notifica	tion)	
For fur	rther information concerning this matter,	please call:		
H. Jan	nes Herborn, III	407	765-9946	
	Name of Person	at (Area Coo	le Daytime Telephone Nu	ımber

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

authority:	mited liability company submits the following statement of			
FIRST: The name of the limited liability company is:				
SECOND: The Florida Document Number of the limite	L05000016384 ed liability company is:			
THIRD: The street address of the limited liability comp 3801 Avalon Park Boulevard East, Suite 200	pany's principal office is:			
Orlando, Florida 32828				
The mailing address of the limited liability co P.O. Box 781848	mpany's principal office is:			
Orlando, Florida 32878				
person on the following: 1. May execute an instrument transferring rea H. James Herborn, HI a. Granted to:	transferee, manager, officer or otherwise or to a specific all property held in the name of the company.			
	er Person or Entity			
May enter into other transactions on behalt H. James Herborn, II a. Granted to:				
	er Person or Entity			
H Como A	H. James Herborn,III			
Signature of authorized representative	Typed or printed name of signature			

Filing Fee:

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