L050000 29565

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	Wortman Enterprises, LLC		
SUBJE		Limited Liability Comp	pany
Dear S	ir or Madam:		
The en	closed Statement of Authority and fee(s) are	e submitted for filing.	
Please	return all correspondence concerning this in	natter to the following:	
Jack	G. Williams		
	Name of Person	 	
	Firm/Company		
Post	Office Box 2176		
	Address		
Pana	ama City, FL 32402		
	City/State and Zip Code		
willia	mspclaw@gmail.com		
	E-mail address: (to be used for future ann	nual report notification)
For fur	ther information concerning this matter, ple	ase call:	
Jack	G. Williams	850 at ()	763-5368
	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	Registrati Division o P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314

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: Wortman Enterprises, LLC				
SECOND: The Florida Document Number of the limited liability company is: L05000029565				
THIRD: The street address of the limited liability company's principal office is: 2525 Country Club Drive				
Lynn Haven, FL 32444				
The mailing address of the limited liability company's principal office is: Post Office Box 927				
Lynn Haven, FL 32444				
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 tool specific person on the following: 1. May execute an instrument transferring real property held in the name of the company. Benjamin R. Wortman				
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: Benjamin R. Wortman				
b. No authority granted to:				
Rand J. Wortman				

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

Typed or printed name of signature

Signature of authorized representative