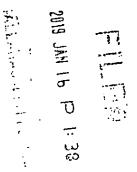
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COVER LETTER

	tion Section of Corporations	-	A Company
SUBJECT:	desco Buckin' Bulls, LLC		••
	Name of L	imited Liability Com	pany
Dear Sir or Mada	m:		
The enclosed Stat	ement of Authority and fee(s) are	submitted for filing.	
Please return all o	orrespondence concerning this ma	atter to the following	:
Michael Tede	esco		
-	Name of Person		
	Firm/Company		
23915 NE St	ate Road 26		
	Address	·	
Melrose, Flor	ida 32666		
	City/State and Zip Code		
gangsterbulls	@yahoo.com		
E-mail a	ddress: (to be used for future annu	al report notification)
For further inform	ation concerning this matter, pleas	se call:	
Michael Tede	sco	352 at ()	359-2304
	Name of Person	Area Code	Daytime Telephone Number
	COURIER ADDRESS:		G ADDRESS:
	Registration Section Registration Section Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327			6327
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			ee, Florida 32314

STATEMENT OF AUTHORITY

uthority	
IRST:	The name of the limited liability company is: Tedesco Buckin' Bulls, LLC
ECON	D: The Florida Document Number of the limited liability company is: L05000085622
	The street address of the limited liability company's principal office is: 23915 NE State Road 26, Melrose, FL 32666
	The mailing address of the limited liability company's principal office is: 23915 NE State Road 26, Melrose, FL 32666
sition or	H: This statement of authority grants or sets limitations of authority on all persons having the status or of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: Michael Tedesco
	b. No authority granted to: Johnny Tedesco
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the company. a. Granted to: Michael Tedesco
<i>,</i>	b. No authority granted to: Johnny Tedesco Muddet Trixsco
Ju- gnature	of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)