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Florida Department of State
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STATEMENT OF AUTHORITY

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

PAINTED CLIFFS LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	$25.00

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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: Painted Cliffs LLC

SECOND: The Florida Document Number of the limited liability company is: L06000048967

THIRD: The street address of the limited liability company's principal office is:

One N. Clematis Street
Suite 500
West Palm Beach, FL 33401

The mailing address of the limited liability company's principal office is:

~~P.O. Box 4807~~ 35 Garnet Hill Drive
~~Sedona, AZ 86340~~ Sedona, AZ 86336

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 to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.
   a. Granted to: Jacqueline S. Miller
   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:
   b. No authority granted to:

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Signature of authorized representative

Mary D. Fisher, Manager
Typed or printed name of signature

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