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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 600/3 ANIMAL CREATIONS, LLC Name of Limited Liability Company			
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Statement of Authority and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
EDWIN W. HUBBARD III			
Name of Person			
Crop's ANIMAL CRAM, DI LLC Firm/Company			
Firm/Company			
4488 COCONUT ROAD SOUTH			
Address			
LAKE WORN, FL 33461 City/State and Zip Code			
City/State and Zip Code			
SANETHEKIDS 1 TO ATT. NET			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Person Name of Person			

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS:

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

STATEMENT OF AUTHORITY

authority		_
FIRST:	The name of the limited liability company is: GOD'S ANIMAL CREATION	ids lic
SECON	ID: The Florida Document Number of the limited liability company is:	Ø29574
THIRD:	: The street address of the limited liability company's principal office is:	
	LAKE WORTH, FL 33461	
	The mailing address of the limited liability company's principal office is:	
position :	 This statement of authority grants or sets limitations of authority on all persons having to a person in a company, whether as a member, transferee, manager, officer or otherwise on the following: May execute an instrument transferring real property held in the name of the company. 	r to a specific
	a. Granted to: ICINIC GADEBUSCH BOB BLACK	
	b. No authority granted to:	0 APVEDBROT
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comparation is the comparation of the comparation in the comparation is the comparation of the comparation in the comp	··
	b. No authority granted to:	
Signature	Typed or printed name of s Filing Fee: \$25.00	BBALD III.

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