

L07 00012773Z

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

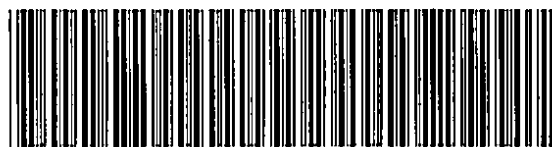
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 304 1ST STREET, LLC

\_\_\_\_\_  
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:

Barbara Buck

\_\_\_\_\_  
Name of Person

Butler Land Holding II

\_\_\_\_\_  
Firm/Company

10109 Lake Lamar Ct

\_\_\_\_\_  
Address

Jacksonville, FL 32256

\_\_\_\_\_  
City/State and Zip Code

barbarabutlerbuck@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Buck

904

612-6393

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**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

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: 304 1ST STREET, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L07000127732

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

10109 Lake Lamar Ct

Jacksonville FL 32256

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

10109 Lake Lamar Ct

Jacksonville FL 32256

**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: Barbara Buck

b. No authority granted to: Blair Butler May

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company:

a. Granted to: Barbara Buck

b. No authority granted to: Blair Butler May

Barbara Buck  
Signature of authorized representative

Barbara Buck

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)