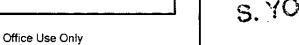
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(Re	equestor's Name)	
(Ad	ldress)	
- (Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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OF COUNSEL: GEORGE L. VARNADOE

lacrowbridge@napleslaw.com

July 23, 2015

Registration Section - Division of Corporations Clifton Building 2661 Executive Center Circlt Tallahassee, FL 32301

Re: Kellton, LLC

15295 Pembroke Pt., Naples, Florida 34110

Dear Sir / Madam:

In connection with the above-referenced transaction, we hereby request that you provide a certified copy of the Statement of Authority we filed with your office on July 23, 2015 for the above-referenced company. We have included our check in the amount of \$55.00 representing payment for the certified copy.

Please use the enclosed Federal Express return envelope to return the certified copy to our office.

Please feel free to contact me if you have any questions.

Very truly yours,

Real Estate Paralegal

Cheffy Passidomo, P.A.

/lac Enclosures 11749-0003

COVER LETTER

TO:	Registration Section Division of Corporations			
~~~~		LTON, LLC		
SUBJ		ited Liability Co	ompany	
Dear S	ir or Madam:			
The er	closed Statement of Authority and fee(s) are su	bmitted for filir	ng.	
Please	return all correspondence concerning this matter	er to the followi	ing:	
Kath	erine A. Scott			
<del></del> -	Name of Person		_	
	Firm/Company	<del></del> -		
1083	6 Crystal Ridge Ct.			
	Address		<del>_</del>	7400
Orla	nd <b>∳</b> Park, IL 60467			G G
	City/State and Zip Code		_	
kath	y@scottgc.com			13.5 E
	E-mail address: (to be used for future annual	report notificat	ion)	3 5
For fu	ther information concerning this matter, please	call:		30 m
Kath	erine A. Scott	708	269-8035	ं की
	Name of Person	Area Cod	e Daytime Telephon	e Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Taliahassee, Florida 32301

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

## STATEMENT OF AUTHORITY

IDCT.	The name of the limited liability company is:	KELLTON, LLC
	The hank of the finited flathing company is.	
CON	D: The Florida Document Number of the limited	d liability company is:L08000007633
HIRD	The street address of the limited liability compa 15295 Pembroke Pt.	any's principal office is:
	Naples, FL 34110	
	The mailing address of the limited liability con 10836 Crystal Ridge Ct.	npany's principal office is:
	Orland Park, IL 60467	
	of a person in a company, whether as a member,	itations of authority on all persons having the status or transferee, manager, officer or otherwise or to a specifi
	n the following:  1. May execute an instrument transferring real	transferee, manager, officer or otherwise or to a specifi
	n the following:  1. May execute an instrument transferring real	property held in the name of the company.  ott, its sole Managing Member
	a. Granted to:    Katherine A. Scotter   Katherine A. Scotter	property held in the name of the company.  ott, its sole Managing Member
	a. Granted to:    Katherine A. Scotter   Katherine A. Scotter	property held in the name of the company.  ott, its sole Managing Member  of, or otherwise act for or bind, the company.
	a. Granted to:  May execute an instrument transferring real  a. Granted to:  Katherine A. Sco  b. No authority granted to:  2. May enter into other transactions on behalf  a. Granted to:  Katherine A. Sco	property held in the name of the company.  ott, its sole Managing Member  of, or otherwise act for or bind, the company.

CR2E138 (2/14)