L09000 061 808

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



400333119904

03/10/19--0112: 441 441 FE.T.

STATE VILVESE STATES



COVER LETTER

Division of Corporations			
BLR-Villa City Road Commercia SUBJECT:	I, LLC		
Name of Limited	I Liability Com	pany	
Dear Sir or Madam:			
The enclosed Statement of Authority and fee(s) are subn	nitted for filing.		
Please return all correspondence concerning this matter t	o the following:	:	
Holly L. Collins			
Name of Person	 .		
Nelson Mullins Broad and Cassel			
Firm/Company			
390 N. Orange Avenue, Suite 1400			
Address			
Orlando, Florida 32801			
City/State and Zip Code			
holly.collins@nelsonmullins.com			
E-mail address: (to be used for future annual re	port notification	n)	
For further information concerning this matter, please ca	II:		
Holly L. Collins	407	839-4200	20
Name of Person	Area Code	Daytime Telephone	Number SE
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registrati Division (P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee. Florida 32314	2019 SEP 10 AH 8: 15

TO:

Registration Section

STATEMENT OF AUTHORITY

authority:	605.0302(1). Florida Statutes, this limited liability company submits the follow	_	ement o	ſ
FIRST: The name of	of the limited liability company is: BLR-Villa City Road Commercia	al, LLC		
SECOND: The Flo	808	_		
THIRD: The street	address of the limited liability company's principal office is: Drange Avenue, Suite 1400	_		
Orlando	, Florida 32801	_		
	ing address of the limited liability company's principal office is: Drange Avenue, Suite 1400	_		
Orlando	, Florida 32801			
position of a person person on the follow	secute an instrument transferring real property held in the name of the compar Holly I. Collins	or to a s	pecific	Lan
b.	C. David Brown, II No authority granted to:	LAHASSEELEL	2019 SEP 10 AM 8: 1	east Gran to the
2. May e	nter into other transactions on behalf of, or otherwise act for or bind, the com Granted to:	-	Ŋ	
	C. David Brown, 11	_		
b.	No authority granted to:	_		
Holly Signature of authoriz	Holly L. Collins Typed or printed name of	- of signati	ıre	

Certified Copy: \$30.00 (optional)