#L09000089402

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





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K. SALY EXAMINER AUG 20 2014

COVER LETTER

TO: Registration Section Division of Corporations			
Velocity Aero LLC			
SUBJECT: Name of I	Limited Liability Comp	pany	
Dear Sir or Madam:			
The enclosed Statement of Authority and fee(s) ar	e submitted for filing.		
Please return all correspondence concerning this n	natter to the following:		
Chris Meigs Owen			
Name of Person			
Velocity Aero LLC			
Firm/Company			
546 Severn Ave			
Address			
Tampa FL 33606			
City/State and Zip Code			
womenfly@mac.com			
E-mail address: (to be used for future and	nual report notification)	
For further information concerning this matter, ple	ease call:		
Chris Meigs Owen	813	992-2310	
Name of Person	Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
Clifton Building	P.O. Box	P.O. Box 6327	
2661 Executive Center Circle	Tallahass	Tallahassee, Florida 32314	

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

authority:	
FIRST: The name of the limited liability company is:	Aero LLC
SECOND: The Florida Document Number of the limited liability	y company is: L09000089402
THIRD: The street address of the limited liability company's print 546 Severn Ave, Tampa FL 33606	ncipal office is:
The mailing address of the limited liability company's	principal office is:
546 Severn Ave, Tampa FL 33606	SEE TO
FOURTH: This statement of authority grants or sets limitations of position of a person in a company, whether as a member, transfere person on the following: 1. May execute an instrument transferring real property a. Granted to:	of authority on all persons having the status or ee, manager, officer or otherwise or to a specific y held in the name of the company.
b. No authority granted to: Jayson Owen	
2. May enter into other transactions on behalf of, or oth a. Granted to:	herwise act for or bind, the company.
b. No authority granted to: Jayson Owen	
Wind Junear	Chris Meigs Owen
Signature of authorized representative Filing Fee: \$25	Typed or printed name of signature 5.00

CR2E138 (2/14)