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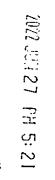
(Ř	equestor's Name)	
(Address)		
(Address)		
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of	Status
Special Instructions to	Eiling Officer	
Special Instructions to Filing Officer:		





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06/27/22--01031--012 **150.00



et 9/21/2022

COVER LETTER

TO: Registration Section Division of Corporations		
·		
ADERHOLT, LLC SUBJECT:		
Name	of Limited Liability Com	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s	s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to the following	:
Jeannie Shipp		
Name of Person		
The Midgett Law Firm, PLLC		
Firm/Company		
3510 NE 14th Street		
Address		
Ocala, FL 34470		
City/State and Zip Code		
Jeannie@midgettelderlaw.com		
E-mail address: (to be used for future	annual report notification	n)
For further information concerning this matter	, please call:	
Jeannie F. Shipp	352 at (369-3777
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



A PROFESSIONAL LIMITED LIABILITY COMPANY

June 24, 2022

Registration Section Florida Division of Corporations PO Box 6327

Tallahassee, FL 32314

RE: Statements of Authority

- Aderholt, LLC
- Elder Planning Income Concepts, LLC
- Jakthan Properties, LLC
- Midget Investments, LLC
- Redfish Properties, LLC
- The Seneca Fund, LLC

Dear Sir/Madam:

Please find enclosed Statements of Authority for the above 6 Entities along with the \$25 filing fee for each, totaling \$150.00.

Thank you in advance for your prompt attention to this matter.

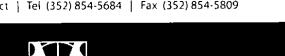
Sincerely.

Jeannie F. Shipp, FRP

Florida Registered Paralegal to DAVID E. MIDGETT, ESQ.

Jeanna F Shipp

DEM:jfs Enclosures



STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited lia authority:	
FIRST: The name of the limited liability company is: ADERH	OLT, LLC
SECOND: The Florida Document Number of the limited liabili	ity company is:
THIRD: The street address of the limited liability company's p 3510 NE 14th Street, Ocala, FL 34470	rincipal office is:
	2022 34.12
	·
FOURTH: This statement of authority grants or sets limitation position of a person in a company, whether as a member, transfe person on the following:	
May execute an instrument transferring real proper David Midgett or Daniel Ro Granted to:	
b. No authority granted to: N/A	
May enter into other transactions on behalf of, or a a. Granted to: David Midgett or Daniel R	
b. No authority granted to: N/A	
Signature of authorized representative Filing Fee: S Certified Copy: \$	David Midgett, Managing Member Typed or printed name of signature 325.00 GROW (antional)