

L10000069666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

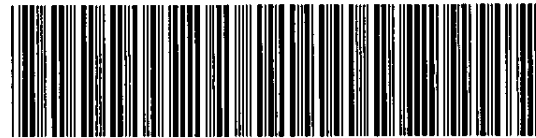
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000273346550

07/24/15--01001--016 \*\*55.00

RECEIVED  
DEPARTMENT OF STATE  
JUL 23 PM 4:07

2015 JUL 23 AM 8:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

JUL 24 2015

Y SULKER

**Wolters Kluwer**

2075 Centre Pointe Boulevard, Tallahassee, FL, 32308

850-205-8842

**CROWN LAND HOLDINGS, LLC**

**L10000069666**


**Thank you!**

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	
<b>Statement of Authority</b>	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<b>Statement of Authority</b>		
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

7/23/2015

**ST**

Order#:  
**9635783**

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

**Wolters Kluwer**

2075 Centre Pointe Boulevard, Tallahassee, FL, 32308

850-205-8842

**CROWN LAND HOLDINGS, LLC**

**L10000069666**

--


**Thank you!**

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	
<b>Statement of Authority</b>	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<b>Statement of Authority</b>		
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

7/23/2015

**ST**

Order#:  
**9635783**

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

### 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 Crown Land Holdings, LLC

**SECOND:** The Florida Document Number of the limited liability company is L1000006966

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

6001 34<sup>th</sup> Street North, St Petersburg, FL 33714

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

6001 34<sup>th</sup> Street North, St Petersburg, FL 33714

**FOURTH:** This statement of authority grants and sets limitations of authority on the following designated person : Susan L. Scheeres

1. Ms. Scheeres is hereby explicitly granted the power and authority to bind Crown Land Holdings, LLC as further described herein. Ms. Scheeres is specifically authorized to execute and deliver, on behalf of Crown Land Holdings, LLC, to or for the benefit of Comerica Bank, a Texas banking association, or any of its affiliates (collectively, "Comerica Bank"), any and all loan agreements, promissory notes, Mortgages, Deeds of Trust, Certificates and Indemnities, and all related documents requiring the signature of Crown Land Holdings, LLC, including, without limitation, security agreements, guarantees, and/or instruments securing or conveying any interests in personal or real property held in the name of Crown Land Holdings, LLC.

2. This grant of authority is made in connection with all documents previously executed by Ms. Scheeres on behalf of Crown Land Holdings, LLC to Comerica Bank in connection with credit facilities currently outstanding to Crown Land Holdings, LLC from Comerica Bank, as well as to future credit facilities provided to Crown Land Holdings, LLC by Comerica Bank, until this Statement of Authority is amended, cancelled, or expires, as provided in the Florida Revised Limited Liability Company Act.

3. Ms. Scheeres grant of authority herein to bind Crown Land Holdings, LLC, is expressly limited to the grant described in paragraphs 1 and 2 above, and she shall no additional or broader authority to bind Crown Land Holdings, LLC, except as may be permitted in any subsequently filed Statement of Authority.

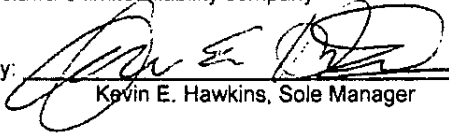
(Signatures on following page)

FILED

2015 JUL 23 AM 9:24

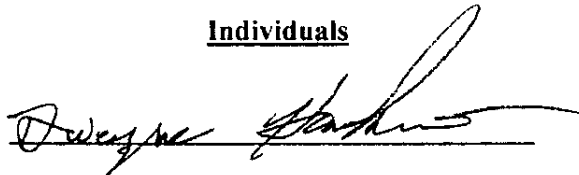
**NAMES AND SIGNATURES OF ALL  
MEMBERS OF THE COMPANY**

HAWKINS CAPITAL INVESTMENTS, LLC, a  
Delaware limited liability company

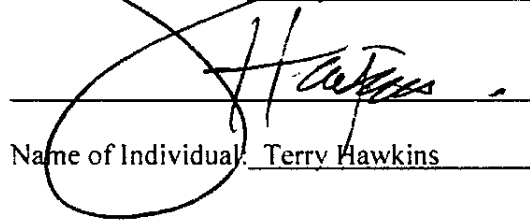
By:   
Kevin E. Hawkins, Sole Manager

**NAMES AND SIGNATURES OF ALL  
MANAGERS OF THE COMPANY**

**Individuals**



Name of Individual: Dwayne Hawkins



Name of Individual: Terry Hawkins

Name of Individual: James R. Myers



Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

FILED  
2018 JUL 23 AM 8:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA