

L11000105067

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000264252 3)))



H150002642523ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 NOV -4 AM 8:07

FILED

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
CROWN HAMILTON, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

15 NOV -4 PM 2:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

2015 NOV -4 AM 8:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### 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 HAMILTON, LLC, a Florida limited liability company

**SECOND:** The Florida Document Number of the limited liability company is L11000105067

**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 HAMILTON, LLC, a Florida limited liability company as further described herein. Ms. Scheeres is specifically authorized to execute and deliver, on behalf of CROWN HAMILTON, LLC, a Florida limited liability company, 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 HAMILTON, LLC, a Florida limited liability company, 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 HAMILTON, LLC, a Florida limited liability company.

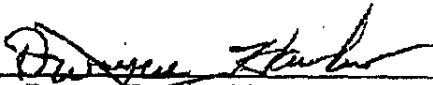
2. This grant of authority is made in connection with all documents previously executed by Ms. Scheeres on behalf of CROWN HAMILTON, LLC, a Florida limited liability company to Comerica Bank in connection with credit facilities currently outstanding to CROWN HAMILTON, LLC, a Florida limited liability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

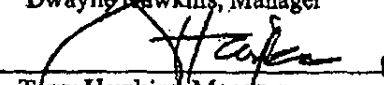
3. Ms. Scheeres grant of authority herein to bind CROWN HAMILTON, LLC, a Florida limited liability company, is expressly limited to the grant described in paragraphs 1 and 2 above, and she shall no additional or broader authority to bind, except as may be permitted in any subsequently filed Statement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


(Signatures on following page)

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

Crown Chattanooga, LLC

By:   
Dwayne Hawkins, Manager

By:   
Terry Hawkins, Manager


By:   
James R. Myers, Manager

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

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  
2015 NOV -4 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA