## 11300006717

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

Office Use Only



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FEB 2 2 2016

**3 MASON** 

## **COVER LETTER**

	Name of Person	at () Area Code	Daytime Telephone Number
Cornelius	O. Vander Waal	561	743-0572
or further in	formation concerning this matter	, please call:	
E-m	ail address: (to be used for future	annual report notification)	
	ellsouth.net		
auribi@bi	alloqueth moe		
	City/State and Zip Code		
Fequesta.	, FL 33469		
	Address		
308 Tequ	esta Drive, Suite 10		
	Firm/Company		
W LLC			
	Name of Person		
Jornelius	O. Vander Waal	······································	
Samalica	O Vanda-1841		
lease return	all correspondence concerning th	is matter to the following:	
he enclosed	Statement of Authority and fee(s	) are submitted for filing.	
ear Sir or M	ladam:		
		of Limited Liability Compa	any
UBJECT:	VW LLC		
	\^*/		

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, Florida 32301

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E138 (2/14)

## STATEMENT OF AUTHORITY

authority	:			•	company submits th	e following stateme	ent of
FIRST:	The name of	of the limited liab	oility company is: _	VWLLC			
SECON	D: The Flor	rida Document N	lumber of the limite	ed liability com	pany is:L13000	0006717	
	The street		mited liability comp				
	Tequesta	a, FL 33469	_				
		ng address of the	limited liability co	mpany's princ	ipal office is:		
	Tequesta	a, FL 33469				<del></del>	
position of person of	of a person in the following.  May ex	in a company, whing: ecute an instrum	hether as a member	, transferee, m	thority on all person anager, officer or of in the name of the	therwise or to a spec	
	a.	Granted to	H. Vander Waa			B 1 9	S medicand
	ь.	No authority g	ranted to:			OF STATE	O
	2. May er		ansactions on behal		ise act for or bind, t	he company.	
		Cornelius I	H. Vander Waa	al			
	b.	No authority g	ranted to:	_ <del>-</del>			
		Ma	<u> </u>		Cornelius O. \		·
Signature	e of Muthoriz	zed re∕presentativo	Filing Fee:	\$25.00 Copy: \$30.00		I name of signature	