L13000178615

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
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SECULIARY OF STATE OF

4AR 0 3 2017 J. HARRIS

COVER LETTER

TO;	Registration Section Division of Corporations	4				
SUBJE						
Name of Limited Liability Company						
Dear S	ir от Madam:					
The en	closed Statement of Authority and fee(s) are su	bmitted for filing.				
Please	return all correspondence concerning this matte	er to the following:				
Stepl	hen B. Shell					
	Name of Person					
Shell Fleming Davis & Menge						
	Firm/Company					
Post	Office Box 1831		•			
	Address					
Pens	acola, FL 32591-1831					
	City/State and Zip Code					
skipb	outler@bellsouth.net					
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Stepl	hen B. Shell	850	434-2411			
	Name of Person	Area Code	Daytime Telephone Number			
	STREET/COURIER ADDRESS:	MAILIN	G ADDRESS: —			
Registration Section		Registrati	on Section			
	Division of Corporations		of Corporations			
	Clifton Building	P.O. Box				
	2661 Executive Center Circle Tallahassee, Florida 32301	i alianasse	ee, Florida 32314			

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following st authority:	atement (of
FIRST: The name of the limited liability company is: JB Legacy, LLC		
SECOND: The Florida Document Number of the limited liability company is: L13000178615		
THIRD: The street address of the limited liability company's principal office is: 3044 E. KINGSFIELD RD		
Pensacola, FL 32514		
The mailing address of the limited liability company's principal office is: 3044 E. KINGSFIELD RD		
Pensacola, FL 32514		
FOURTH: This statement of authority grants or sets limitations of authority on all persons having the s position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a person on the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: James E. Butler, Jr. or James E. Butler, III		;
b. No authority granted to:	17 MAR	
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company. a. Granted to: James E. Butler, Jr. or James E. Butler, III	R-2 PM 2: 22	FILED STA
b No authority granted to:	22	
Signature of authorized representative Filing Form \$525.00 James E. Butler, Jr. Typed or printed name of signature of authorized representative	ature	
Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)		