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COVER LETTER

TO: Registration Section Division of Corporations		
Bonnet Lake Holdings LLC SUBJECT:		
	mited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Talia Krugman-Kadi		
Name of Person		
K Squared Holdings LLC		
Firm/Company		
204 37th Street N #124		
Address		
St. Petersburg, FL 33704		
City/State and Zip Code		
taliaksquared@gmail.com		
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter, pleas	se call:	
Talia Krugman-Kadi	352 at ()	870-0618
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

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: Bonnet Lake Holdings LLC **SECOND:** The Florida Document Number of the limited liability company is:_____ THIRD: The street address of the limited liability company's principal office is: 834 E University Ave Gainesville, FL 32601 The mailing address of the limited liability company's principal office is: 204 37th Street N #124 St. Petersburg, FL 33704 FOURTH: This statement of authority grants or sets limitations of authority on all persons having the states or or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following: 1. May execute an instrument transferring real property held in the name of the company. Granted to:_____Talia Krugman-Kadi No authority granted to: Susan Krugman-Kadi May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: Talia Krugman-Kadi b. No authority granted to: Susan Krugman-Kadi Talia Krugman-Kadi

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

Typed or printed name of signature