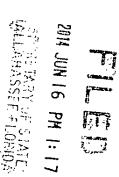
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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JUN 18 2014 J. BRUCE

COVER LETTER

TØ:	Registration Section Division of Corporations			
SUBJE	Mainsail Commercial, LLC			
	Name of Limite	ed Liability Con	npany	
Dear Si	r or Madam:			
The end	closed Statement of Authority and fee(s) are sub	mitted for filing		
Please r	return all correspondence concerning this matter	to the following	3:	
Rache	el Schemer			
	Name of Person		-	
J. Rile	ey Williams, PLC			
	Firm/Company		=	
2141	Park Street			
	Address		-	
Jacks	sonville, FL 32204			
	City/State and Zip Code		-	
rache	l@jriley-law.com			
	E-mail address: (to be used for future annual r	eport notification	n)	
For furt	ther information concerning this matter, please of	all:		
Rach		904	425-0040	
	Name of Person	Area Code	Daytime Telephone	e Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registra Divisior P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 ssee, Florida 32314	2014 JUN 16 PM STANTANASSEE FL

STATEMENT OF AUTHORITY

•	io section (505.0302(1), Florida Statutes, this limited liability company submits the following	statement of		
FIRST: 1	The name o	of the limited liability company is: Mainsail Commercial, LLC			
SECOND	: The Flo	rida Document Number of the limited liability company is: L14000072546		• -	
THIRD: 1	The street	address of the limited liability company's principal office is: lly Oak Drive			
		Park, FL 32065			
		ng address of the limited liability company's principal office is:			
	Orange I	Park, FL 32065			
FOURTH position of person on t	fa person i	tement of authority grants or sets limitations of authority on all persons having the in a company, whether as a member, transferee, manager, officer or otherwise or to	status or a spēcific		
1.	. May ex	ecute an instrument transferring real property held in the name of the company.			
i,	. May ex a.	•			
1.	a.	Granted to: Both Mainsail Capital, LLC and Scott A. Carnes must consent to transfer No authority granted to:			
1.	a. b. May cr	Granted to: Both Mainsail Capital, LLC and Scott A. Carnes must consent to transfer		2014	**************************************
	a. b. May cr	Granted to: Both Mainsail Capital, LLC and Scott A. Carnes must consent to transfer No authority granted to: inter-into other transactions on behalf of, or otherwise act for or bind, the company.	PALAHASSEE I	2814 JUN 16 PM	

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

CR2E138 (2/14)