

L14000081205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Esterline Landscape Company Orlando, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William T. Link, Jr.

Name of Person

Reed Mawhinney & Link, PLLC

Firm/Company

1611 Harden Blvd.

Address

Lakeland, FL 33803

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William T. Link, Jr.

Name of Person

863

Area Code

687-1771

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

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: ESTERLINE LANDSCAPE COMPANY ORLANDO, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000081205

THIRD: The street address of the limited liability company's principal office is:
731 DUNCAN AVENUE
KISSIMMEE, FL 34744

The mailing address of the limited liability company's principal office is:
3210 SYDNEY ROAD
PLANT CITY FL 33566

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status 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.

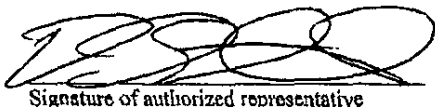
a. Granted to: GEETA SINGH-KNIGHT, AS C.E.O.

b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: GEETA SINGH-KNIGHT, AS C.E.O.

b. No authority granted to: _____



Signature of authorized representative

DANIEL ESTERLINE

Typed or printed name of signature

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

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KISSIMMEE, FLORIDA

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