

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000176283 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BURR & FORMAN LLP

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: (407)540-6600

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALTAMONTE 434 INVESTORS LLC

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H140001762833

COVER LETTER

TO:	Registration Section Division of Corporations			
CT III T	ALTAMONTE 434 INVESTO	RS, LLC		
SUBJECT: Name of Limited Liability Company				
Dear S	ir or Madam:			
The enclosed Statement of Authority and fee(s) are submitted for filing.				
Please	return all correspondence concerning this ma	atter to the following	p	
Jess	e E. Graham, Jr., Esq.			
	Name of Person		•	
Burr	& Forman LLP			
	Firm/Company		•	
200 9	S. Orange Avenue, Suite 800			
	Address		•	
Orlar	ndo, Florida 32801			
	City/State and Zip Code		•	
jgrah	am@buπ.com			
	E-mail address; (to be used for future annu	al report notification	1)	
For fur	ther information concerning this matter, plea	se call:		
John	C. Vick, III	407 st (628-0077	
	Name of Person	Area Code	Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registrati Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 ee, Florida 32314	

CR2E138 (2/14)

H140001762833

STATEMENT OF AUTHORITY

STATEMENT	OF AUTHORITY
authority:	nited liability company submits the following statement of
FIRST: The name of the limited liability company is:	
SECOND: The Florida Document Number of the limits	d liability company is: L14000101152
THIRD: The street address of the limited liability comp 630 S. Maitland Avenue, Sulte 100	any's principal office is:
Maitland, Florida 32751	
The mailing address of the limited liability con 630 S. Maitland Avenue, Suite 100	d liability company is: L14000101152 eny's principal office is:
Maltland, Florida 32751	
FOURTH: This statement of authority grants or sets limposition of a person in a company, whether as a member, person on the following: 1. May execute an instrument transferring real a. Granted to: John C. Vick, III,	transferee, manager, officer or otherwise or to a specific property hald in the name of the company.
b. No authority granted to:	
May enter into other transactions on behalf a. Granted to ; John C. Vick, III	of, or otherwise act for or bind, the company. , and Ryan P. Stahl
b. No authority granted to:	
	John C. Vick, III
Signature of authorized representative Fiting Fee: Certified Co	Typed or printed name of signature \$25.00 opy: \$30.00 (optional)

CR2E138 (2/14)