L15000000808

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DIVISION OF CORPURATIONS

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K. SALY JAN 10 2018

COVER LETTER

TO: Registration Section Division of Corporations		
Graystone Property Holding	js, LLC	
SUBJECT: Name of L	Limited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Anthony P. Brewer		
Name of Person		
Graystone Property Holdings, LLC		
Firm/Company		
1802 N. Alafaya Trail, Suite 177		
Address		
Orlando, FL 32826		
City/State and Zip Code		
graystonepropertyholdings@gmail.co	m	
E-mail address: (to be used for future and	nual report notification))
For further information concerning this matter, ple	ease call:	
Anthony P. Brewer	407 at (234-0143
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registrat	G ADDRESS: ion Section of Corporations 6327

Tallahassee, Florida 32314

CR2E138 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

authority:		ed liability company submits the follow	
FIRST: The name of the la	mited liability company is: Gr	aystone Property Holdings, L	LC
SECOND: The Florida Do	cument Number of the limited	liability company is: L1500000080	08
	s of the limited liability compan ya Trail, Suite 177	y's principal office is:	_ 0
Orlando, FL	32826		18 JE
_	ress of the limited liability comp	pany's principal office is:	18 JAN -8 PH 3: 20
Orlando, FL 3	2826		ş. 20 _
position of a person in a co person on the following: 1. May execute:	mpany, whether as a member, tr an instrument transferring real p	ations of authority on all persons having ansferee, manager, officer or otherwise property held in the name of the compa	e or to a specific
b. No a	uthority granted to: Brian T.	Anderson	_
-	o other transactions on behalf o ted to:	f, or otherwise act for or bind, the com	 pany. _
b. No a	uthority granted to: Brian T.	Anderson	-
-	Suda	Brian T. Anderson	
Signature of authorized rep	Filing Fee:	Typed or printed name \$25.00 by: \$30.00 (optional)	of signature

CR2E138 (2/14)