L15006665383

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number) -				
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J. SHEETS FEB 0 4 789

Salter • Feiber

3940 NW 16th Boulevard, Bldg. B Gainesville, Florida 32605

P.O. Box 357399 Gainesville, Florida 32635

T: 352,376,8201 F: 352,376,7996 www.salterlaw.net

January 23, 2015

VIA FEDEX

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

Re: Beville Holdings LLC

To Whom It May Concern:

Enclosed with this correspondence, please find the following:

- 1. Cover Letter, Articles of Amendment to Articles of Organization, and this firm's check in the amount of \$55.00 for the filing fee and a certified copy. An extra copy of the Articles of Amendment to Articles of Organization has been provided for certification.
- 2. Cover Letter, Statement of Authority, and this firm's check in the amount of \$55.00 for the filing fee and a certified copy. An extra copy of the Statement of Authority has been provided for certification.

Once these documents have been filed, please return them to our office ASAP using the FedEx envelope provided.

If you have any questions regarding the enclosed, please call us.

Sincerely.

Angela L. Bowen

Legal Assistant to Denise Lowry Hutson

:ab Enclosures

COVER LETTER

	istration Section sion of Corporations				
SUBJECT:	Beville Holdings LLC				
Name of Limited Liability Company					
Dear Sir or M	1adam:				
The enclosed	Statement of Authority and fee(s) are st	abmitted for filing.			
Please return	all correspondence concerning this matt	er to the following:			
Denise	Lowry Hutson				
	Name of Person				
Salter	Feiber, PA				
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Firm/Company				
3940 NV	N 16th Blvd., Bldg. B				
	Address				
Gaines	ville, Florida 32605				
	City/State and Zip Code				
rsjgat	or@gmail.com				
E-m	nail address: (to be used for future annua	l report notification)	•		
For further in	formation concerning this matter, please	e call:			
Angela	Bowen	at (352)	416-0428 Daytime Telephone Number		
	Name of Person	Area Code	Daytime Telephone Number		
Reg Divi Cliff 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building 1 Executive Center Circle ahassec, Florida 32301	Registration of P.O. Box	f Corporations		

CR2E138 (2/14)

STATEMENT OF AUTHORITY

authority		•
FIRST:	The name of the limited liability company is: Beville Holdings	LLC
SECON	D: The Florida Document Number of the limited liability company is: L150	00005383
	The street address of the limited liability company's principal office is: 6231 SW 37th Way	
	Gainesville, FL 32608	
	The mailing address of the limited liability company's principal office is: 6231 SW 37th Way	
	Gainesville, FL 32608	
person or	of a person in a company, whether as a member, transferce, manager, officer or in the following: 1. May execute an instrument transferring real property held in the name of the a. Granted to: Robert S. Johnson or Erica Johnson	·
	b. No authority granted to:N/A	15 JAK SECRES TALLANS
	2. May enter into other transactions on behalf of, or otherwise act for or bind, a. Granted to: Robert S. Johnson or Erica Johnson	- SA 20 -
	b. No authority granted to: N/A	12 DRIDA
K	PS/Mh— Robert S	. Johnson
Signature	Filing Fee: \$25.00 Cartified Conv. \$10.00 (ontional)	ed name of signature

CR2E138 (2/14)