Division of Corporations Electronic Filing Cover Sheet

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(((H15000063530 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : BAND, GATES, DRAMIS, P.L.

Account Number : 120130000059

: (941)366-8010

Fax Number

: (941)366-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RINGLING ASSOCIATES, LLC

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1 Company 3 2015

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STATEMENT OF AU	THORITY
Pursuant to section 605.0302(1), Florida Statutes, this limited liab authority:	bility company submits the following statement of
FIRST: The name of the limited liability company is: RINGL	ING ASSOCIATES, LLC
SECOND: The Florida Document Number of the limited liability	ry company is: L15000013612
THIRD: The street address of the limited liability company's print 1 SOUTH SCHOOL AVENUE	incipal office is:
SUITE 501	LRETA HAR
SARASOTA, FL 34237	
The mailing address of the limited liability company's  1 SOUTH SCHOOL AVENUE	- 19 <b>19 17</b>
SUITE 501	PA ADD
SARASOTA, FL 34237	
person on the following:  1. May execute an instrument transferring real propert a. Granted to: CHAD L. GATES AND	GEORGE DRAMIS
b. No authority granted to:	
2. May enter into other transactions on behalf of, or or a. Granted to: CHAD L. GATES OR	therwise act for or bind, the company. GEORGE DRAMIS
b. No authority granted to:	
L	CHAD L. GATES
Signature of authorized representative Filing Fee: \$2 Certified Conv. \$3	Typed or printed name of signature 25.00 10.00 (ontlone)