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TO: Registration Section Division of Corporations	
SUBJECT:	
Name of L.	imited Liability Company
Dear Sir 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:
D. John Morgeson, Jr.	
Name of Person	
deBeaubien, Knight, Simmons, Mantze	aris & Neal, LLP
Firm/Company	
332 N. Orange Avenue	
Address	
Orlando, FL 32801	
City/State and Zip Code	<u></u>
djm00@dbksmn.com	
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter, plea	se call:
D. John Morgeson, Jr.	407 992-3600
Name of Person	Area Code Daytime Telephone Numb
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassec, Florida 32314

CR2E138 (2/14)

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

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

THIRD: The street address of the limited liability company's principal office is:

9550 West Highway 192

Clermont FL 34714

The mailing address of the limited liability company's principal office is:

9550 West Highway 192

Clermont FL 34714

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, transferce, 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.

R. Granted to: Graham D. Greene; Barrie F. Wheatley;

Christopher J. North;Geoffrey C. North;Philip J. Mumford

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APR 30

PM F:

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2.

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AHASSEE FL

b. No authority granted to: N/A

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

a. Granted to: Graham D. Greene; Barrie F. Wheatley; Christopher J. North;Geoffrey C. North;Philip J. Mumford

b. No authority granted to: N/A

Graham D. Greene Ωm Typed or printed name of signature ignature of authorized representative \$25.00 Filing Fee: Certified Copy: \$30.00 (optional)

CR2E138 (2/14)