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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : MILAM HOWARD, ET.AL.
Account Number : I20000000206
Phone : (904) 357-3660
Fax Number : (904) 357-3661

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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: ahoward@milamhoward.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GROUNDHOG, LLC

Table with 2 columns: Item and Amount. Rows include Certificate of Status (0), Certified Copy (0), Page Count (02), and Estimated Charge (\$25.00).

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Groundhog, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

G. Alan Howard

Name of Person

Milam Howard Nicandri Dees & Gillam, P.A.

Firm/Company

14 E Bay Street

Address

Jacksonville, Florida 32202

City/State and Zip Code

ahoward@milamhoward.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

G. Alan Howard

Name of Person

904

Area Code

3573660

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

STATEMENT OF AUTHORITY

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

FIRST: The name of the limited liability company is: Groundhog, LLC

SECOND: The Florida Document Number of the limited liability company is: L15000093937

THIRD: The street address of the limited liability company's principal office is:  
14 E. Bay Street  
Jacksonville, Florida 32202

The mailing address of the limited liability company's principal office is:  
14 E. Bay Street  
Jacksonville, Florida

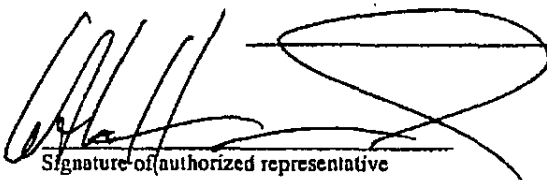
FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company

- a. Granted to: Tony Loughman
- b. No authority granted to: \_\_\_\_\_

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

- a. Granted to: Tony Loughman
- b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

G. Alan Howard  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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