## L1500094373

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	<del>=</del> #)		
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(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
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	<b>⊅</b> •	ÇOVEI	R LETTER		: Ur	<b>#</b>
	gistration Section vision of Corporations	; <b>,</b> a.		滑		
SUBJECT:	Stratus Construc	tion & Roofing,	LLC			
SOBOLCI.		Name of Limited	Liability Com	pany		
Dear Sir or N	Madam:					
The enclosed	d Statement of Authority	y and fee(s) are subm	itted for filing.			
Please return	all correspondence cor	ncerning this matter t	o the following:			
Robert B	. Worman, Esq.					
	Name of Pe	erson				
Worman	& Sheffler, P.A.					
	Firm/Comp	any	<u> </u>			
2707 W.	Fairbanks Ave.					
•	Address					
Winter Pa	ark, Florida 32789					
	City/State and Zip	Code	······································			
rworman	@wormanlaw.com	1				
E-n	nail address: (to be used	for future annual re	port notification	)		
For further in	nformation concerning t	his matter, please cal	li:			
Robert B.	. Worman	at	(407	843-5353		
	Name of Person		Area Code	Daytime Teleph	one Numb	oer -

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

authority:	limited liability company submits the following statement of			
FIRST: The name of the limited liability company is	Stratus Construction & Roofing, LLC			
SECOND: The Florida Document Number of the lim	nited liability company is: L15000099373			
THIRD: The street address of the limited liability co 603 Beulah Road				
Winter Garden				
Florida 34787				
The mailing address of the limited liability 603 Beulah Road	company's principal office is:			
Winter Garden				
Florida 34787				
	real property held in the name of the company.  pp, III; Scott Kramer; Jose Lobo			
b. No authority granted to: Roge	er W. Facemire			
2. May enter into other transactions on beha. Granted to:	half of, or otherwise act for or bind, the company.  app, III; Scott Kramer, Jose Lobo			
b. No authority granted to:	er W. Facemire			
Rogewan	Roger W. Facemire			
Signature of authorized representative  Filing For Certified	Typed or printed name of signature ee: \$25.00 d Copy: \$30.00 (optional)			

CR2E138 (2/14)