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MAR 17 2016 J SHIVERS

COVER LETTER

	egistration Section ivision of Corporations	*	2 4 1				
SUBJECT	Pie in the Sky Land Holdings LLC						
SOBJECT		Limited Liability Com	pany				
Dear Sir or	Madam:						
The enclose	ed Statement of Authority and fee(s) ar	e submitted for filing.					
Please retu	rn all correspondence concerning this r	natter to the following:	:				
Laurie F	Pennebaker, Manager						
	Name of Person						
c/o Cha	ssis Master						
-	Firm/Company						
2400 SV	N 60TH Terrace						
	Address						
Miramar	r, Florida 33023						
	City/State and Zip Code						
Chassis	masters@aol.com						
E	-mail address: (to be used for future an	nual report notification	n)				
For further	information concerning this matter, ple	ease call:					
Laurie P	Pennebaker, Manager	954	494-7571				
	Name of Person	Area Code	Daytime Telephone Number				
	FREET/COURIER ADDRESS:		G ADDRESS:				
	egistration Section ivision of Corporations		Registration Section Division of Corporations				
	lifton Building	P.O. Box					
26	661 Executive Center Circle		Tallahassee, Florida 32314				

Tallahassee, Florida 32314

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

authority	:	• • •	da Statutes, this limite			J
FIRST:	The name	of the limited liabi	lity company is: Pie	iii die Oky Laik		
SECONI	D: The Flo	orida Document Nu	umber of the limited li	ability company is:_	_1800002853	4
THIRD:	The street	address of the lim	ited liability company ce, Miramar, Floi	's principal office is		- -
		•	limited liability compr ce, Miramar, Flor	• • •	e is:	- -
position of		in a company, who	y grants or sets limita ether as a member, tra			
	l. Maye a.		ent transferring real pr urie Pennebaker,			16 H SECON
	b.		anted to:			AR 16 AM B: 3
:	2. May 6	,144	nsactions on behalf of aurie Pennebake	gr		RAIS
	b.	No authority gra	anted to:			- - -
Dave	i lm	di-			Pennebaker,	
Signature	e of authori	zed representative	Filing Fee: Certified Copy	1 yped \$25.00 7: \$30.00 (optional)	or printed name o	i signature

CR2E138 (2/14)