## 116000032876

(Requestor's Name)	
(Address)	<u> </u>
(Address)	
(City/State/Zip/Phone #)	
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(Document Number)	
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**S Warren** JAN 3 0 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations		
Evans Groves Marion CousuBJECT:	unty, LLC	
	f Limited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Karl A. Burgunder		
Name of Person		
Karl A. Burgunder, Attorney at Law		
Firm/Company		
1490 Swanson Drive, Ste. 200		
Address		
Oviedo, FL 32765		
City/State and Zip Code		
karl@cfbizlaw.com		
E-mail address: (to be used for future a	annual report notification	)
For further information concerning this matter, p	please call:	
Karl A. Burgunder	407	366-3555
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registrati Division o P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314

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## STATEMENT OF AUTHORITY

authority		_	f
FIRST:	The name of the limited liability company is: EVANS GROVES MARION COU	NTY, LLC	
SECON	D: The Florida Document Number of the limited liability company is: L16000032876		_
	: The street address of the limited liability company's principal office is: 110 EAST BROADWAY		
	OVIEDO, FL 32765		
	The mailing address of the limited liability company's principal office is: PO BOX 620460		
	OVIEDO, FL 32762		
position	<ul> <li>This statement of authority grants or sets limitations of authority on all persons having of a person in a company, whether as a member, transferee, manager, officer or otherwise on the following:</li> <li>May execute an instrument transferring real property held in the name of the company a. Granted to: EVANS GROVES, INC.</li> </ul>	or to a specific	コニ
	b. No authority granted to: ANY OTHER PERSON OR ENTITY	A 9:54'	C
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the compa  a. Granted to:  EVANS GROVES, INC.	iny.	
	b. No authority granted to: ANY OTHER PERSON OR ENTITY		
Signatur	ARTHUR F. EVANS Typed or printed name of	`signature	

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)