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COVER LETTER

TO: Registration Section Division of Corporations			
Creative Order, LLC			
SUBJECT: Name of Limit	ed Liability Comp	pany	
Dear Sir or Madam:			
The enclosed Statement of Authority and fee(s) are sul	omitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
Benjamin B. Bush, Esq.			
Name of Person			
Gardner, Bist, et. al			
Firm/Company			
1300 Thomaswood Drive			
Address			
Tallahassee, Florida 32308			
City/State and Zip Code			
ben@gbwlegal.com			
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter, please	call:		
Benjamin B. Bush, Esq.	850	385-0070	
Name of Person	Area Code	Daytime Telephone Number	
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 32314		

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

Pursuant authority		05.0302(1), Florid	a Statutes, this limite	ed liability company submits the followi	ng statement of
FIRST:	The name of	of the limited liabil	ity company is: Cre	eative Order, LLC	
SECON	D : The Flor	ida Document Nu	mber of the limited l	iability company is: L16000166421	
THIRD:		address of the limi		y's principal office is:	
	Gainesvi	lle, FL 32608			بمسر
		ng address of the li		pany's principal office is:	SO KUY TO
	Gainesvi	lle, FL 32608			•
position	of a person in the follow:	n a company, whe	ther as a member, tra	ations of authority on all persons having ansferee, manager, officer or otherwise or operty held in the name of the company anager	or to a specific
	b.	No authority gra	nted to:		
	2. May en		sactions on behalf or	f, or otherwise act for or bind, the compa	any.
	b.	No authority gra	nted to:		
	oshi	- L. Brel		Joshua L. Bush	
Signatur	e of authoriz	ed representative	Filing Fee: Certified Cop	Typed or printed name of \$25.00 y: \$30.00 (optional)	signature