Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

Erom:

Account Name : GARDNER BREWER MARTINEZ-MONFORT, P.A.

Account Number : I20060000058 Phone : (813) 221-9600 Fax Number ÷ (813)221-9611

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MULTI-FAMILY CONSTRUCTION BAYSHORE, LEE

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S. WARREN

JUL 2 1 2017

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COVER LETTER

TO:	Registration Section Division of Corporations				
CUDI	MULTI-FAMILY CONSTRUC	TION BAYSHO	RE, LLC		
SOBJE	Name of Limited Liability Company				
Dear S	ír oτ Madam:				
The en	closed Statement of Authority and fee(s) are	submitted for filing.			
Please	return all correspondence concerning this ma	tter to the following:			
Chris	stopher W. Brewer				
	Name of Person				
Gard	iner Brewer Martinez-Monfort, P.A				
	Firm/Company				
400	North Ashley Drive, Suite 1100				
	Address				
Tam	pa, FL 33602				
	City/State and Zip Code	——————————————————————————————————————			
cbre	wer@gbmmlaw.com				
	E-mail address: (to be used for future annu	ial report notification)		
For fur	other information concerning this matter, plea	se call:			
Chris	stopher W. Brewer	813 at ()	221-9600		
	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 e P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314		

CR2E138 (2/14)

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STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited lial authority:		
FIRST: The name of the limited liability company is: MULTI-BAYSHORE, LLC, a Florida limited liability comp	FAMILY CONSTRUCTION any	
ECOND: The Florida Document Number of the limited liability company is: L16000215114		
THIRD: The street address of the limited liability company's pr 10 BROWN ST.		
NEWNAN, GA 30263-2031		
The mailing address of the limited liability company's P.O. BOX 1038	principal office is:	
NEWNAN, GA 30264-1038		
FOURTH: This statement of authority grants or sets limitations position of a person in a company, whether as a member, transfer person on the following: 1. May execute an instrument transferring real propert a. Granted to: Jeffrey H. Turner, Authority	wheld in the name of the company.	
b. No authority granted to:	20 元	
May enter into other transactions on behalf of, or of a. Granted to: Jeffrey H. Turner, Automated to: Jeffrey H	horized Person	
b. No authority granted to:		
Office Strange	Jeffery H. Turner	
Signalure of Authorized representative Filing Fee: \$2 Certified Copy: \$3	Typed or printed name of signature 25.00 (optional)	