## 116000 230 418

(Requestor's Name)	
(Address)	
(Address)	_
(1333)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	<u> </u>
(Document Number)	<u> </u>
(Excument Number)	
Certified Copies Certificates of Status	<u> </u>
Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

Southfork Q Development, I	LLC	
	imited Liability Comp	any
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Jeffery S Hills		
Name of Person		
Southfork Q Development, LLC		
Firm/Company		
111 S. Armenia Ave.; Suite 201		
Address		
Tampa, FL 33609		
City/State and Zip Code		
brose@eisenhowerpropertygroup.com	n	
E-mail address: (to be used for future an	nual report notification	)
For further information concerning this matter, ple	ease call:	
Jeffery S Hills	813	363-4888
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 ce, Florida 32314

CR2E138 (2/14)

## STATEMENT OF AUTHORITY

authority:	es, this limited liability company submits the following	ag statement of
F1RST: The name of the limited liability com	pany is: Southfork Q Development, LLC	
SECOND: The Florida Document Number of	the limited liability company is: L16000230418	
THIRD: The street address of the limited liab 111 S. Armenia Ave.; Suite 2	ility company's principal office is:	
Tampa, FL 33609		
The mailing address of the limited I	iability company's principal office is:	
Tampa, FL 33609		
position of a person in a company, whether as a person on the following:	or sets limitations of authority on all persons having a member, transferee, manager, officer or otherwise of ferring real property held in the name of the company AS J. DISTER	or to a specific
b. No authority granted to:		PH 2
2. May enter into other transactions a. Granted to:	s on behalf of, or otherwise act for or bind, the compa	iny.
b. No authority granted to:		
Signature of authorized representative	Jeffery S. Hills  Typed or printed name of iling Fee: \$25.00	signature
C	ertified Copy: \$30.00 (optional)	