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## COVER LETTER

TO:	Registration Section Division of Corporations	•	•
	HK Redevelopment LLC		
SUBJ	ECT:		-1_ttr=
	Name	of Limited Liability Con	npany
Dear S	Sir or Madam:		
The er	iclosed Statement of Authority and fee(s	) are submitted for filing	
Please	return all correspondence concerning th	is matter to the following	g:
Oliver	K Hedge		
	Name of Person		-
HK R	edevelopment LLC		
	Firm/Company		-
3208 1	E. Colonial Drive #326		
	Address		-
Orland	do, FL 32803		
	City/State and Zip Code		-
oliver	@optimre.com		
	E-mail address: (to be used for future	annual report notification	on)
For fu	rther information concerning this matter.	, please call:	
Oliver	K Hedge		937-8795
	Name of Person	Area Code	Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## STATEMENT OF AUTHORITY

Pursuant authority		05.0302(1), Florida Statuto	es, this limited liab	ility company submits the follo	wing statement of
FIRST:	The name o	f the limited liability comp	oany is: HK Redev	relopment LLC	
SECON	D: The Flor	ida Document Number of	the limited liability	y company is:	
THIRD		address of the limited liab onial Drive #326	ility company's pri	ncipal office is:	
	Orlando, FL	. 32803	· · · · · · · · · · · · · · · · · · ·		_ 
	The mailing	ng address of the limited li onial Drive #326		principal office is:	_
	Orlando, FI				<del>-</del> 
position	of a person in the follow	n a company, whether as a ng: ecute an instrument transf Granted to: Mary Caroly	erring real property	of authority on all persons havi ee, manager, officer or otherwing wheld in the name of the compa	se or to a specific
	b.				<del>-</del>
	2. May er a.	nter into other transactions  Granted to:   Mary Caro		herwise act for or bind, the con	— npany. 
	b.	No authority granted to:			_ _ _
05	hest.	<del>/</del>		Oliver K Hedge	
Signatur	e of authoriz		ling Fee: \$2 ertified Copy: \$3	Typed or printed name 5.00 (optional)	of signature