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RALLAHASSEE, FLORIDA

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COVER LETTER

Div	usion of Corporations		
SUBJECT:	STILL FLORIDA PROPERT	TIES, LLC	
SOBJECT.	Name of L	imited Liability Comp	pany
Dear Sir or N	Madam:		
The enclosed	d Statement of Authority and fee(s) are	submitted for filing.	
Please return	all correspondence concerning this m	atter to the following:	
HERBER	T L. ALLEN, JR.		
	Name of Person		
HERBER	T L. ALLEN, JR., P.A.		
	Firm/Company	,	
1360 S. F	PATRICK DR., SUITE 1A		
	Address	.	
SATELLI	TE BEACH, FL 32937		
	City/State and Zip Code		
steve@di	ialplumbing.com		
E-r	mail address: (to be used for future ann	ual report notification	1)
For further is	nformation concerning this matter, ple	ase call:	
HERBER	TALLEN	321	779-1211
	Name of Person	Area Code	Daytime Telephone Number
	REET/COURIER ADDRESS: gistration Section	MAILING ADDRESS: Registration Section	

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

TO:

Registration Section

STATEMENT OF AUTHORITY

authority:	05.0302(1), Florida Statutes, this limited liability company submits the follow	-	nt of
FIRST: The name of	f the limited liability company is: STILL FLORIDA PROPERTIES,	LLC	
SECOND: The Flor	ida Document Number of the limited liability company is: L1700010596	4	
	address of the limited liability company's principal office is:		
ROCKLE	DGE, FL 32955		
The mailing 290 PAIN	ng address of the limited liability company's principal office is:		
ROCKLE	DGE, FL 32955		
position of a person i person on the follow	tement of authority grants or sets limitations of authority on all persons having in a company, whether as a member, transferce, manager, officer or otherwise ing: ecute an instrument transferring real property held in the name of the company Granted to: STEPHEN T. PACKARD AND JILL	or to Espec	12 MUL 21
ű.	MCFARLAND, PROVIDED THEY BOTH SIGN	FLORI	AN T
b.	No authority granted to: ANY PERSONS OTHER THAN STEPHEN T. PACKARD AND JILL MCFARLAND	OA	>
2. May ci a.	nter into other transactions on behalf of, or otherwise act for or bind, the comp Granted to: MCFARLAND	any.	
b.	No authority granted to: ANY PERSONS OTHER THAN STEPHEN T PACKARD AND JILL MCFARLAND		
2	STEPHEN T. PACK	ARD	

Filing Fee:

\$25.00 Certified Copy: \$30.00 (optional)

Typed or printed name of signature

CR2E138 (2/14)

Signature of authorized representative