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COVER LETTER

TO: , Registration Section Division of Corporations		
USAQUACYCLING, LLC		
SUBJECT: Name of L	Limited Liability Com	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this m	natter to the following	;
MICHAEL G. HORTON		
Name of Person	<u> </u>	
LAW OFFICE OF HORTON & HORTO	ON, P.A.	
Firm/Company		
900 WEST HIGHWAY 50		
Address		
CLERMONT, FL 34711		
City/State and Zip Code	· · ·	
E-mail address: (to be used for future and	nual report notification	1)
For further information concerning this matter, ple	ease call:	
MICHAEL G. HORTON	352	394-4008
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section		SG ADDRESS: ion Section
Division of Corporations Clifton Building	Division	of Corporations
2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

authority:	05.0302(1), Florida Statutes, this limited liability company submits the following statement of
FIRST: The name o	f the limited liability company is: USAQUACYCLING, LLC
SECOND: The Flor	ida Document Number of the limited liability company is: L17000185794
THIRD: The street a	address of the limited liability company's principal office is: EYSTONE DRIVE, CLERMONT, FL 34711
	ng address of the limited liability company's principal office is: EYSTONE DRIVE, CLERMONT, FL 34711
FOURTH: This stat	rement of authority grants or sets limitations of authority on all persons having the status or n a company, whether as a member, transferee, manager, officer or otherwise or to a specific
1. May exc a.	ecute an instrument transferring real property held in the name of the company. Granted to: STEPHANIE C. MEAT AND LAURENT R. MEAT
b.	No authority granted to: LAURA F. MEAT AND LUCA A. MEAT A. MEAT
2. May en a.	Granted to: STEPHANICE C. MEAT AND LAURENT R. MEAT ORAL ORAL
b.	No authority granted to: LAURA F. MEAT AND LUCA A. MEAT
Signature of authoria	STEPHANIE C. MEAT Typed or printed name of signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)