

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H18000118005 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : MILAM HJWARD, ET.AL.

Account Number : I20000000206 Phone : (904)357-3660

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

Email Address:	Ema:
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NORTH FLORIDA TIRE AND AUTO CENTER, LLC

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Corporate Filing Menu

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STATEMENT OF AUTHORITY

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STATEMENT OF	FAUTHORITY
Pursuant to section 605.0302(1), Florida Statutes, this limits authority:	-
FIRST: The name of the limited liability company is:	rth Florida Tire and Auto Center, LLC
بهمية فدان	Control technique (1927)
SECOND: The Florida Document Number of the limited l	iability company is: L18000046815
THIRD: The street address of the limited liability company 153326 County Road 108	y's principal office is:
Yulee, FL 32097	128
	自己
The mailing address of the limited liability comp	any's principal office is:
153326 County Road 108	一
Yulee, FL 32097	Mar ST # 1: 15
	—————————————————————————————————————
position of a person in a company, whether as a member, traperson on the following: 1. May execute an instrument transferring real properties.	operty held in the name of the company.
a. Granted to: Ellen Edwards	45
	<u>8</u>
6. No authority granted to:	
	·
2. May enter into other transactions on behalf of	or otherwise act for or bind, the company.
Ellen Edwards	
a. Granted to:	
	· · · · · · · · · · · · · · · · · · ·
b. No authority granted to:	
•	
1111	
(y. The tt	G. Alan Howard
Signature of authorized representative Filing Fee: Certified Cop	Typed or printed name of aignature \$25.(ii) **: \$30.63 (optional)

CR2E138 (2/14)