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	To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : GASSMAN, CROTTY & DENICOLO,	APPRI 2019 HAY 16					
	Account Number : 075350000514 Phone : (727)442-1200 Fax Number : (727)443-5829 **Enter the email address for this business entity to annual report mailings. Enter only one email addr	be used for future					
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Fax audit # #19000160551;

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: 8340 ABBINGTON CIRCLE C-35, L.L.C.

SECOND: The Florida Document Number of the limited liability company is: L19000100042

THIRD: The street address of the limited liability company's principal office is:

1245 Court Street

Clearwater, FL 33756

The mailing address of the limited liability company's principal office is:

1245 Court Street

Clearwater, FL 33756

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FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or ______ position of a person in a company, whether as a member, transferce, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property hold in the name of the company.

	a.	Granted to: DEN	IISE J. DUCA a	and PETE	ER L. APICELLA	-
	b.	No authority gran	ted to:			-
2.	May cn a.	Granted to	actions on behalf of NISE J. DUCA	, or otherwi	se act for or bind, the comp FER L. APICELLA	-)any. -
	b.	No authority gran	nted to:			-
Signature of a	HIDriz	ed representative	Filing Fee: Certified Cop	\$25.00 by: \$30.00 (Christopher J. Deni Typed or printed name ((optional)	
CR2E138 (2/	4)					

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