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COVER LETTER

Division of Corporations		
SUBJECT: Cadence Acquisitions LLC Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Lana Moriece Name of Person		
Cadence Acquisitions LLC		
2632 Pleasant Place	23 FEB	Par hay of their chailes
Sarasota, FL 34239	321	(.* **}
City/State and Zip Code	AH	
E-mail address: (to be used for future annual report notification)	6: 55	EAT UK
For further information concerning this matter, please call:		
lana Morjece at 941, 667-5262 Name of Person Area Code Daytime Telephone Number		

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO:

Registration Section

STATEMENT OF AUTHORITY

authority	·		
FIRST:	The name of the limited liability company is: <u>Caclence Acquisition</u>	75 LLI	-
SECON	D: The Florida Document Number of the limited liability company is: L210001	0588	9
	The street address of the limited liability company's principal office is:		
	2632 Pleasant Place		
	Sarasita, FL 34239	72	 •
		83 £	regional Office
	The mailing address of the limited liability company's principal office is: 2032 PICASANT Place	21	9.5 1.7
		AH 6:	
	Sarasota, FL 34239	<u>റ</u> വ	== :
	The following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: LAWA MOVIECE		
	b. No authority granted to: to any other person, busynes		
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the company a. Granted to: 1202 MOY18CE	y.	
	b. No authority granted to: ANY OTHER PERSON, WISHESS OF ENTITY		
Signatur	<u>A MOYHECE</u> c of authorized representative Lava Moyher Typed or printed name of si	PCC_	
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	Similar	