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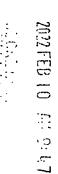
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COVER LETTER

TO:	Registration Section Division of Corporations	•	•	Æ	r		
, SUBJI	18th Hole in Seminole, LLC		.•	ŧ	p = 2	ه .	
	Nan	ne of Limited	Liability C	ompai	ny		
Dear S	ir or Madam:						
The en	closed Statement of Authority and fee	e(s) are subm	itted for fili	ng.			
Please	return all correspondence concerning	this matter to	the follow	ring:			
Luca E	Di Nunzio						
	Name of Person			_			
Dorcey	y Law Firm						
	Firm/Company						
10181	Six Mile Mile Cypress Pkwy, Suite C	•					
	Address						
Fort M	lyers, FL 33966						
	City/State and Zip Code						
suppor	t@dlfregisteredagent.com						
	E-mail address: (to be used for futu	re annual rep	ort notifica	tion)			
For fur	ther information concerning this matte	er, please cal	:				
Luca E	Di Nunzio	at	239	3	08-1073		
	Name of Person		Area Cod	le	Daytimo	e Telephor	ie 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

STATEMENT OF AUTHORITY

	ant to section 605.0302(1), Florida Statutes, this limited liability companing statement of authority:		
314341			2002
NAMI	E OF LLC: 18TH HOLE IN SEMINOLE, LLC		177 177
FLOR	RIDA LLC DOCUMENT NUMBER: L21000269228		018
PRIN	CIPAL OFFICE ADDRESS: 18970 Crooked Lane, Lutz, FL 33603		
			.5
MAIL	JNG ADDRESS (if different): 18970 Crooked Lane, Lutz, FL 33603		: 9: k7
MAN	AGER: Beth M. Calhoun		
has un	is the authority given to Beth M. Calhoun, Manager of the above-named LLC. limited authorization, the option "All Authorization to act on behalf of the L limited to the Options Listed Below (Unlimited Authority)" will be selected a Her.	LC, in	cluding
ki Listed	All Authorization to act on behalf of the LLC, including but not limited to the Below (Unlimited Authority).	ne Opti	ions
	He/She has Authority to Execute an Instrument Conveying (Sale/Lease) Rea	al Prop	erty
Owner	by the LLC.	•	•
	He/She has Authority to Purchase Property in the Name of the LLC.		
	He/She has authority to Enter into Contract(s) for the Maintenance/ Improve	ment e	of Real
Proper	ty.		
	He/She has authority to Open Bank Account(s) in Name of the LLC.		
	He/She has authority to Close Bank Account(s) Owned by the LLC.		
	He/She has authority to Use, Execute, Negotiate, and/or Assign LLC Debit/0	Credit	Cards
and/or	other instruments of payment on behalf of the LLC.		
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Pers	onal	
Proper	ty (Ex: Vehicles/Equipment).		
	He/She has authority to Enter into Contract(s) for the Purchase of Personal F	ropert	y (Ex:
Vehicl	es/Equipment).	=	
	He/She has authority to Enter into Contract(s) for the Purchase of Supplies.		

He/She has authority to Enter into Contract(s) for the Purchase of Material(s).

He/She has authority to Enter into Contract(s) for the Purchase of Merchandise.

	He/She has authority to Enter into Contract(s) for	the Purchase of Services.
	He/She has authority to Enter into Contract(s) for	the Sale of the LLC's Supplies.
	He/She has authority to Enter into Contract(s) for	the Sale of the LLC's Material(s).
	He/She has authority to Enter into Contract(s) for	the Sale of the LLC's Merchandise.
	He/She has authority to Enter into Contract(s) for	the Sale of the LLC's Services.
	He/She has authority to Enter into and maintain Co	ontract(s) for Insurance Services on
beha	If of the LLC.	
	He/She has authority to File Annual Reports with	State of Florida.
	He/She has authority to Amend Annual Reports w	ith State of Florida.
	He/She has authority to File Statement of Authorit	y(s) with State of Florida.
	He/She has authority to Amend/Cancel/Renew Sta	stement of Authority(s) in State of
Flori		•
	Ho/Sha has outhority to A A Artistan - CO !	
	He/She has authority to Amend Articles of Organi	
If mo	ore space was needed, a separate sheet(s) of paper will H HOLE IN SEMINOLE, LLC;	
If mo	ore space was needed, a separate sheet(s) of paper wil	
If mo	ore space was needed, a separate sheet(s) of paper wil	
If mo	H HOLE IN SEMINOLE, LLC; Coccusigned by. 528C64B21BE9454	
If mo	H HOLE IN SEMINOLE, LLC; Coccusigned by. 528C64B21BE9454 Beth Calhoun Name:	I be attached to the back of this form.
If mo	H HOLE IN SEMINOLE, LLC; Cocustigned by. Stroce-18218E9454 Beth Calhoun	