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COVER LETTER

Division of Corporations				
Green Key Ventures, LLC SUBJECT:				
	ame of Limited Liability Comp	pany	_	
Dear Sir or Madam:				
The enclosed Statement of Authority and	fee(s) are submitted for filing.			
Please return all correspondence concerning	ng this matter to the following:			
Loan Thi "Susan" Hanson				
Name of Person	·			
Green Key Ventures, LLC				
Firm/Company			- - '\$	252
4320 Decrwood Lake Pkwy., Suite 101-40	68		7	HAY I
Address				
Jacksonville, FL 32216				
City/State and Zip Code	:		-1.5	所旧:17
Susan@TheHansonGroup.net				
E-mail address: (to be used for fu	uture annual report notification)		
For further information concerning this ma	atter, please call:			
Loan Thi "Susan" Hanson	904 at ()	563-5190		
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	Green Key Venture		
	The name of the limited liability company is:		
SECON	D: The Florida Document Number of the limited liability compa	1.21000334432 ny is:	
	: The street address of the limited liability company's principal o 4320 Deerwood Lake Pkwy., Suite 101-468, Jacksonville, FL 32	216	2622
	The mailing address of the limited liability company's principa		
	4320 Deerwood Lake Pkwy., Suite 101-468, Jacksonville, FL 32.	216	\$ 100 m
position -	 This statement of authority grants or sets limitations of authority of a person in a company, whether as a member, transferee, managed the following: May execute an instrument transferring real property held in Loan Thi "Susan" Hanson a. Granted to: 	rity on all persons having to ger, officer or otherwise or the name of the company.	r to a specific
	Andrew E. Wotton, Jennife b. No authority granted to:	er A. Bosanko	
	May enter into other transactions on behalf of, or otherwise Loan Thi "Susan" Hanson a. Granted to:	•	ıy.
,	Andrew E. Wotton, Jennife b. No authority granted to:		
La	m m m m	pan Thi "Susan" Hanson	
Signatur	re of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (op	Typed or printed name of s	ignature

CR2E138 (2/14)