L770000 87434

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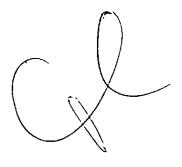
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COVER LETTER

TO: Registration Section Division of Corporations					
Athena Art Collective LLC					
	of Limited Liability Compar	ny			
Dear Sir or Madam:					
The enclosed Statement of Authority and fee(s)	are submitted for filing.				
Please return all correspondence concerning this	s matter to the following:				
Jana Konkel					
Name of Person					
Athena Art Collective LLC					
Firm/Company					
419 Hatchee Drive					
Address					
Crestview, Florida 32536			E.	2023	
City/State and Zip Code				2023 MAR 1 O	
			<u> </u>		
E-mail address: (to be used for future annual report notification)			SE.	PH	
For further information concerning this matter.	please call:		STATE FL	2: 46	A.
Jana Kunkel	at (650)	582-8565			
Name of Person	Area Code	Daytime Telephone l	Number		

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS:

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

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: Athena Art Collective LLC SECOND: The Florida Document Number of the limited liability company is: <u>L2200</u>0087434 THIRD: The street address of the limited liability company's principal office is: 255 Miracle Strip Parkway SE, B-8 Fort Walton Beach, Florida 32548 The mailing address of the limited liability company's principal office is: 255 Miracle Strip Parway SE, B-8 Fort Walton Beach, Florida 32548 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, transferee, manager, officer or otherwise or to a specific person on the following: 1. May execute an instrument transferring real property held in the name of the company. a. Granted to: ____ Konkel or Krista Hawkins b. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company, a. Granted to: ____ Jana Konkel or Krista Hawkins b. No authority granted to: Signature of authorized representative Typed or printed name of signature Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)