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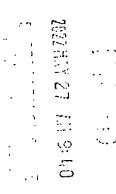
(Re	questor's Name)	
•	,	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filina Officer:	
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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations			
	WWRAACA MANAGEMENT LI	.C		
SUBJE			_	
	Name of	f Limited Liability	Company	
Dear S	r or Madam:			
The en	closed Statement of Authority and fee(s)	are submitted for fi	ling.	
Please	return all correspondence concerning this	matter to the follo	wing:	
DANIE	ELC. PERRI			
	Name of Person		_ 	
PERRI	& JENNINGS PLLC			
Firm/Company				
4 ELEV	/ENTH AVENUE, SUITE ONE			
	Address			
SHALI	MAR, FL 32579			
	City/State and Zip Code	 		
dperri@	perrijennings.law			2022
	E-mail address: (to be used for future a	nnual report notific	ration)	
For fur	her information concerning this matter, p	olease call:		(2)
DANIE	ELC. PERRI	850-	651-3011	
	Name of Person	at (Area Co	ode Daytime Tele	phone 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

	he name o	WWRAACA MANAGEMENT I. of the limited liability company is:	
ECOND:	: The Flor	L2200015 ida Document Number of the limited liability company is:	
HIRD: T	The street	address of the limited liability company's principal office is:	
Ū.	NIT 504		
M	IIRAMAR	BEACH, FL 32550	
	The mailir	ng address of the limited liability company's principal office is:	
_ _			
_			
sition of		tement of authority grants or sets limitations of authority on all person a company, whether as a member, transferee, manager, officer or cling:	otherwise or to a specific
1.	May ex	ecute an instrument transferring real property held in the name of the JEFFERY TODD WILLIAMSON	e company:
	a.	Granted to:AND MARY AMANDA WILLIAMSON, CO-MANAGERS	r 1.7
	b.	N/A No authority granted to:	
2.	. May er a.	nter into other transactions on behalf of, or otherwise act for or bind, JEFFREY TODD WILLIAMSON Granted to:	the company.
		AND MARY AMANDA WILLIAMSON, CO-MANAGERS	
	b.	N/A No authority granted to:	