Florida Department of State Division of Corporation

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Account Number: 072720000036 : (407)843-4600 Phone : (786)901-8020 Fax Number

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K. Brumbley

STATEMENT OF AUTHORITY

authority:	605.0302(1), Florida Statutes, this limited liability company submits the follow	ing state:	ment of	
PIRST: The name	of the limited liability company is:			-
SECOND: The Flo	rida Document Number of the limited liability company is:		-	
	address of the limited liability company's principal office is: COMSTOCK AVE			
WINTE	R PARK, FL 32789			
	ng address of the limited liability company's principal office is: COMSTOCK AVE			
WINTI	CR PARK, FL. 32789			
	tement of authority grants or sets limitations of authority on all persons having in a company, whether as a member, transferee, manager, officer or otherwise ing:			
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