

h72 000312989

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

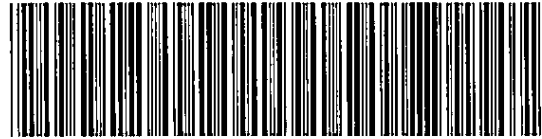
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Wababa LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kelley Jones

\_\_\_\_\_  
Name of Person

Kelley D. Jones, P.A.

\_\_\_\_\_  
Firm/Company

4110 NW 37th Place, Suite B

\_\_\_\_\_  
Address

Gainesville, FL 32606

\_\_\_\_\_  
City/State and Zip Code

Chadstock5@yahoo.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kelley Jones

352

377-2004

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

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### 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: Wababa, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L22000312989

**THIRD:** The street address of the limited liability company's principal office is:

24190 NW 160TH AVE

HIGH SPRINGS, FL 32643

The mailing address of the limited liability company's principal office is:

24190 NW 160TH AVE

HIGH SPRINGS, FL 32643

**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.

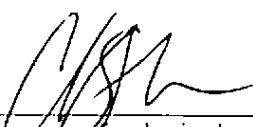
a. Granted to: Chad A. Stockdale

b. No authority granted to: \_\_\_\_\_

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Chad A. Stockdale

b. No authority granted to: \_\_\_\_\_

  
\_\_\_\_\_  
Signature of authorized representative

Chad A. Stockdale  
\_\_\_\_\_  
Typed or printed name of signature

Filing Fee: **\$25.00**  
Certified Copy: **\$30.00 (optional)**

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