(Reque	estor's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
Special Instructions to Filir	ng Officer:
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Eden Brown Properties 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:	
Name of Person	
Firm/Company	
1220 E. Livingston St. Address	
City/State and Zip Code 32803	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person Area Code Daytime Telephone Number	
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

.. DOC-L23000230677

STATEMENT OF AUTHORITY

Pursuant to Section 605.0302(1), Florida Statutes, I, NATIKA K. JACKSON, sole Authorized Member for EDEN BROWN PROPERTIES, LLC (hereinafter "Company"), with the principal and mailing address of 975 Francis Street, Altamonte Springs, FL 32701 states the authority granted for the following person and position:

- 1. NATIKA K. JACKSON, sole Authorized Member of the Company, has the sole and absolute authority to:
 - a. Execute an instrument transferring real property held in the name of the Company; and
 - b. Enter into other transactions on behalf of, or otherwise act for or bind, the Company.

This Statement of Authority was signed on the 10th day of May 2023.

NATIKA K. JACKSON, Authorized Member

& President

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