

LD00000008427

(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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2019 DEC -8 PM 3:07

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FEB 22 2021



December 2, 2020

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

20035522453  
12/08/20 01:32 018 \*\*30.00

RE: Certified copy

To Whom It May Concern:

Please provide our office with a certified copy and return to us in the enclosed self-addressed stamped envelope.

Sincerely,

A handwritten signature in black ink, appearing to read "Laura Mischick".

Laura Mischick

/lm

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sunport, LC  
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:

Lauren Flewellyn  
Name of Person

Jupiter Land Title Co.  
Firm/Company

27 N. Pennock Ln. #104  
Address

Jupiter, FL 33458  
City/State and Zip Code  
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\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren Flewellyn at 561, 7438800  
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

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: Sunport, L.C.

SECOND: The Florida Document Number of the limited liability company is: LO00000002427

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

5253 Center St.  
Jupiter, FL 33458

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

5253 Center St.  
Jupiter, FL 33458

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CLERK OF DISTRICT COURT  
JACKSONVILLE, FL

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: Eugene Francavilla

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: Eugene Francavilla

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

Nicole Trufelli  
Signature of authorized representative

Nicole Trufelli  
Typed or printed name of signature

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