

L02000014273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

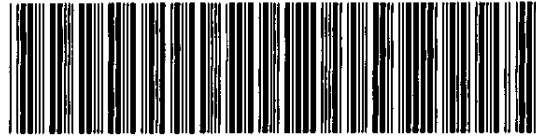
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2017 MAR 20 P 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

n BRUCE
MAR 21 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 8, 2017

MARK EVERSON
5001 SORRENTO CT
CAPE CORAL, FL 33904

oops, sorry

SUBJECT: CAPE CORAL PROPERTIES, L.L.C.
Ref. Number: L02000014273

We have received your document for CAPE CORAL PROPERTIES, L.L.C., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 117A00004458

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TALLAHASSEE, FLORIDA

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2017 MAR 20 PM 3:25
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAPE CORAL 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:

MARK EVERSON

Name of Person

CAPE CORAL PROPERTIES. LLC

Firm/Company

5001 SORRENTO CT

Address

CAPE CORAL, FL 33904

City/State and Zip Code

MARK@MARKEVERSON.COM

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

For further information concerning this matter, please call:

MARK EVERSON

Name of Person

239

Area Code

699-2362

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

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TALLAHASSEE, FLORIDA

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: CAPE CORAL PROPERTIES, LLC

SECOND: The Florida Document Number of the limited liability company is: L02000014273

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

5001 SORRENTO CT

CAPE CORAL, FL 33904

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

5001 SORRENTO CT

CAPE CORAL, FL 33904

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: MARK C EVERSON OR KRIS GLANZMAN OR
KEVIN WARGIN OR JAMES R WELCH

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: MARK C EVERSON OR KRIS GLANZMAN OR
KEVIN WARGIN OR JAMES R WELCH

b. No authority granted to: _____


Signature of authorized representative

MARK C EVERSON

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA

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