

LO3000043247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

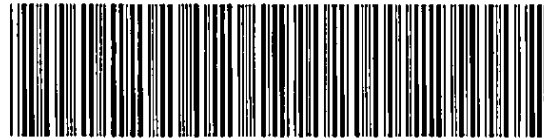
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900332348259

RECEIVED  
FILING OFFICE  
TALLAHASSEE, FLORIDA

19 AUG -6 AM 9:12

FILED

08/06/19--01013--020 \*\*55.00

RECEIVED  
FILING OFFICE  
TALLAHASSEE, FLORIDA

18 AUG -6 PM 12:37

O SIMMONS

AUG 07 2019

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

DOLPHIN WATCH I, LLC

Signature \_\_\_\_\_

Requested by: Seth

08/06/19

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_\_ Courier \_\_\_\_\_

STATEMENT OF AUTHORITY  
OF  
DOLPHIN WATCH I, LLC

---

FILED  
19 AUG -6 AM 9:12  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

Pursuant to Section 605.0302, Florida Statutes, this limited liability company submits the following Statement Of Authority:

**FIRST:** The name of the limited liability company is:  
DOLPHIN WATCH I, LLC

**SECOND:** The street address and mailing address of the limited liability company's principal office is:

3618 El Centro Street  
St. Pete Beach, FL 33706

**THIRD:** This Statement Of Authority grants or sets forth limitations of authority on all persons having the status or position of a person in the Company, whether as a member, transferee, manager, officer or otherwise as follows:

1. May execute an instrument transferring real property held in the name of the Company:

- a. Granted to: Beth Ann Morean
- b. No authority granted to: N/A

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

- a. Granted to: Beth Ann Morean
- b. No authority granted to: N/A

  
Beth Ann Morean, Manager