

L 05000095103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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15 JAN 16 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JAN 29 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nelson Apopta GP, 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:

ED HAMPOEN

Name of Person

Tallman Corporation

Firm/Company

604 S. Lake Sybelle Drive

Address

Maitland FL 32751

City/State and Zip Code

edhampen@aol.com

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

For further information concerning this matter, please call:

Ed Hampden

Name of Person

at (407) 644-9140

Area Code

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

CR2E138 (2/14)

1/13/15
N.B. Attached please find
check #1124 enclosed in
amount of \$55.-

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: Nelson Apopka GP, LLC

SECOND: The Florida Document Number of the limited liability company is: 205000095103

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

604 South Lake Sybelia Drive
Maitland, FL 32751

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

~~same~~ 604 South Lake Sybelia Drive
Maitland, FL 32751

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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: Edmund Hampden or
Barbara Hampden

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: Edmund Hampden or
Barbara Hampden

b. No authority granted to: _____

Edmund Hampden
Signature of authorized representative

Edmund Hampden
Typed or printed name of signature

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