## 10600066165

(Re	equestor's Name)			
(Address)				
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(Cit	ty/State/Zip/Phon	e #)		
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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

•			WALK IN
_		PICK UP:	9/24
		CERTIFIED COPY	
		РНОТОСОРУ	
		cus	
	$\not X$	FILING	Statement of Authority
1.		Cordoba LLC	
		(CORPORATE NAME AND DOCUMENT	#)
2.		(CORPORATE NAME AND DOCUMENT	#)
3.			
Э.		(CORPORATE NAME AND DOCUMENT	#)
4.			
		(CORPORATE NAME AND DOCUMENT	#)
5.		(CORPORATE NAME AND DOCUMENT	#)
6.			
0.		(CORPORATE NAME AND DOCUMENT	#)
SP	ECIA	L INSTRUCTIONS:	

## **COVER LETTER**

TO: Registration Section Division of Corporations
Cordoba, LLC SUBJECT:
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:
Lisa Van Dien
Name of Person
London Bay Homes
Firm/Company
2210 Vanderbilt Beach Rd., Suite 1300
Address
Naples, FL 34109
City/State and Zip Code
lisavandien@londonbay.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

STREET/COURIER ADDRESS:

Name of Person

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

MAILING ADDRESS:

239

Area Code

449-1511

Daytime Telephone Number

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

Lisa Van Dien

## STATEMENT OF AUTHORITY

authority:		f the limited liability of		bility company submits the following statement
SECOND:	The Flori	da Document Numbe	r of the limited liabil	ty company is:L06000066165
THIRD: Th	ne street a	ddress of the limited in a Court		
Na	aples, F	FL 34105		
		g address of the limite	ed liability company	s principal office is:
Naples, FL 34105				
	person ii e followi	n a company, whether ng:	as a member, transforms as a member, transforms ansferring real prope	s of authority on all persons having the status of tree, manager, officer or otherwise or to a specific ty held in the name of the company.
	а.	Eyk van Otterlo		
	b.	No authority granted	l to:	
2.	May en a.	ter into other transact Granted to : Mark Eyk van Otterlo	D. Wilson, Step	otherwise act for or bind, the company. hen G. Wilson
	b.	No authority granted	l to:	
A	9			Lisa Van Dien, Esq.
Signature of	f authoriz	ed representative	— Filing Fee: Certified Copy: 5	Typed or printed name of signature 325.00 (optional)

CR2E138 (2/14)