

h070000052310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

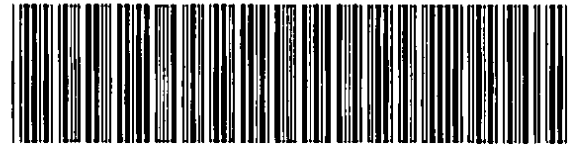
(Business Entity Name)

(Document Number)

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AND
FILED

T.S.
4/13/19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Earnhardt 106, 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:

John M. Morgan

Name of Person

Attorney at Law

Firm/Company

8911 Daniels Pkwy, Ste 6

Address

Fort Myers, Florida 33912

City/State and Zip Code

jmmorgan@morgantitle.com

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

For further information concerning this matter, please call:

John M. Morgan

Name of Person

239

Area Code

454-0572

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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REGISTRATION SECTION
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: Earnhardt 106, LLC


SECOND: The Florida Document Number of the limited liability company is: L07000052310

THIRD: The street address of the limited liability company's principal office is:
1536 Carson Street
Fort Myers, Florida 33901

The mailing address of the limited liability company's principal office is:
1536 Carson Street
Fort Myers, Florida 33901

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: Dominik Goertz
 - 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: Domink Goertz
 - b. No authority granted to: _____



Signature of authorized representative

Dominik Goertz

Typed or printed name of signature

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

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