

LOGO 00103193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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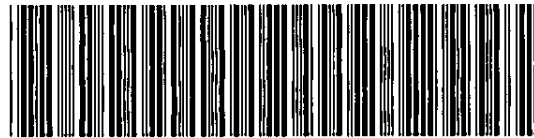
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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XX **CERTIFIED COPY** _____
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XX **FILING** Statement of Authority _____

LB Mediterra, LLC

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: National

STATEMENT OF AUTHORITY

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: LB Mediterra, LLC

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

9130 Galleria Court, Suite 200

Naples, Florida 34109

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

9130 Galleria Court, Suite 200

Naples, Florida 34109

THIRD: 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.

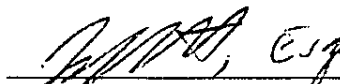
a. Granted to: Mark D. Wilson
Stephen G. Wilson

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 D. Wilson
Stephen G. Wilson

b. No authority granted to: _____


Signature of authorized representative

Jeff Novatt, Esq.
Typed or printed name of signature

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