## Lio occasses

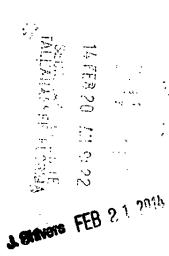
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## WALK IN

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ХХ	CERTIFIED COF	PY
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хх	FILING	Statement of Authority
_	LBF0	unders Club II. LLC
_	(CORPORATE NAME ANI	D DOCUMENT #)
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## 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 FOUNDERS CIUD II, LLC		. <b></b>	
SECON	iD: 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	· •		
position	: This statement of authority grants or sets limitations of authority on all persons having the of a person in a company, whether as a member, transferee, manager, officer or otherwise on the following:  1. May execute an instrument transferring real property held in the name of the company	or to a spe	cific	
	a. Granted to: Mark D. Wilson Stephen G. Wilson			
	b. No authority granted to:	TATI 1381	14	
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the comp a. Granted to: Mark D. Wilson	any	FE3 20	
	Stephen G. Wilson		<u>- 1</u>	
	b. No authority granted to:		o. 22	•
_//	Jeff No Va For authorized representative Typed or printed name of	tt, E	-5g.	
Signatur	of authorized representative Typed or printed name of	signature	<del></del>	

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