	38868
(Requestor's Name) (Address) (Address)	600282688316
(City/State/Zip/Phone #)	02/26/1601004005 **450.00
PICK-UP     WAIT     MAIL     (Business Entity Name)     (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	RECEIVED 16 FEB 26 AH ID: 53 NOT INTERNOT OF FILME SUFFICIENCY OF FILME
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		INC.		236 East 6th Avenue. Tallahassee, Florida 32303 315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666		
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	xx	FILING	STATEMENT	16 FEB		
1.		LUCARNO2, LLC		26 PH		
		(CORPORATE NAME AND DOCL	JMENT #)	1 2: 11		
2.		(CORPORATE NAME AND DOCU	JMENT #)			
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5.		(CORPORATE NAME AND DOCL	JMENT #)			
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## **COVER LETTER**

TO: Registration Section Division of Corporations

Lucarno 2, 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:

Lisa Van Dien

Name of Person

Lucarno 2, LLC

Firm/Company

2210 Vanderbilt Beach Road Suite 1300

Address

Naples, Florida, 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:

Lisa Van Dien \_\_\_\_\_\_at (\_\_\_\_\_) 449-1599 \_\_\_\_\_\_ Name of Person 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

FEB 26

PH

P.O. Box 6327 Tallahassee, Florida 32314

CR2E138 (2/14)

## 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: Lucarno 2, LLC

SECOND: The Florida Document Number of the limited liability company is: L11000138868

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

2210 Vanderbilt Beach Road, Suite 1300

Naples, FL 34109

The mailing address of the limited liability company's principal office is: 2210 Vanderbilt Beach Road, Suite 1300

Naples, FL 34109

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: Mark D. Wilson, Stephen G. Wilson,

Lisa Van Dien

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,

Lisa Van Dien

b. No authority granted to:

Signature of authorized representative

Lisa Van Dien, Esq.

Typed or printed name of signature

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