

L12000008491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

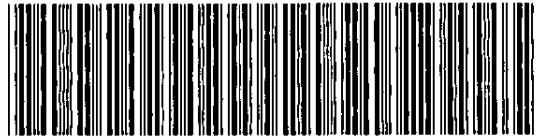
(Document Number)

Certified Copies _____

Certificates of Status _____

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RECEIVED
16 MAR -3 AM 11:05
SUFFICIENT OF FILING

FILED
2016 MAR -3 AM 8:52
RECEIVED OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAR -4

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

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: 3/3

- ☐ **CERTIFIED COPY** _____
- ☒ **PHOTOCOPY** _____
- ☐ **CUS** _____
- ☒ **FILING** STATEMENT OF AUTHORITY

1. **LB FOUNDERS INVESTMENTS, LLC**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LB Founders Investments, 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

LB Founders Investments, 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

Name of Person

at (239)

Area Code

449-1599

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

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: LB Founders Investments, LLC

SECOND: The Florida Document Number of the limited liability company is: L12000008491

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

FILED
2019 APR -3 AM 8:52
CLERK OF CIRCUIT COURT
IN THE COUNTY OF S.W. FLORIDA

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, John Gleeson

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, John Gleeson

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)