

L12000008491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

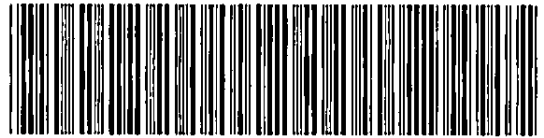
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

File 2<sup>nd</sup>

Office Use Only



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07/23/19--01001--016 \*\*200.00

STATE OF FLORIDA  
DEPARTMENT OF REVENUE

STATE OF FLORIDA  
DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

18 JUL 23 AM 11:13

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**CORPORATE  
ACCESS,  
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**WALK IN**

PICK UP: 7/22/19

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Statement of authority

1. LB Founders Investments, LLC  
(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. File 2nd  
(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

London Bay Homes

\_\_\_\_\_  
Firm/Company

2210 Vanderbilt Beach Rd, Suite 1300

\_\_\_\_\_  
Address

Naples, FL 34109

\_\_\_\_\_  
City/State and Zip Code

annamurphy@londonbay.com

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

For further information concerning this matter, please call:

Lisa Van Dien

239

592-1400

at ( )

\_\_\_\_\_  
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  
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 Rd

Suite 1300

Naples, FL 34109

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

2210 Vanderbilt Beach Rd

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  
\_\_\_\_\_  
Typed or printed name of signature

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

FILED  
2019 JUL 23 AM 11:47  
CLERK OF COUNTY OF S.W. FLA.  
TALLAHASSEE, FL 32301