

L120000016279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

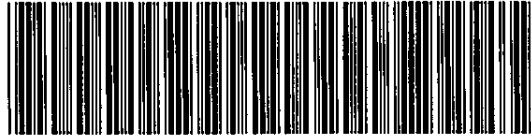
(Business Entity Name)

(Document Number)

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REGISTRY OF STATE
CORPORATIONS

M. MILLIGAN
EXAMINER

MAY -1 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Showpitch 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:

Michael Smith

Name of Person

Showpitch LLC

Firm/Company

1004 Collier Center Way, STE 104

Address

Naples, FL 34110

City/State and Zip Code

msmith@showpitch.com

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

For further information concerning this matter, please call:

Michael Smith

at (

239

948-1500 x 8001

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: Showpitch LLC

SECOND: The Florida Document Number of the limited liability company is: L12000016279

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

1655 North Commerce Parkway, STE 203

Weston, FL 33326

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

1004 Collier Center Way, STE 104

Naples, FL 34110

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TALLAHASSEE, 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: Board of Managers

b. No authority granted to: Members

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: CEO, CFO and the Board of Managers

b. No authority granted to: Members



Signature of authorized representative

Michael Smith

Typed or printed name of signature

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