

L12000119608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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NOV 13 2015  
J. BRUCE

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 869102 7103152

AUTHORIZATION :

COST LIMIT : \$ 55.00

ORDER DATE : November 11, 2015

ORDER TIME : 8:44 AM

ORDER NO. : 869102-005

CUSTOMER NO: 7103152

DOMESTIC AMENDMENT FILING

NAME: STBD, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: \_\_\_\_\_

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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: STBD, LLC, A FLORIDA LIMITED LIABILITY COMPANY

SECOND: The Florida Document Number of the limited liability company is: L12000119608

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

2647 PROFESSIONAL CIRCLE

SUITE 1201

NAPLES, FLORIDA 34119

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

2647 PROFESSIONAL CIRCLE

SUITE 1201

NAPLES, FLORIDA 34119

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:

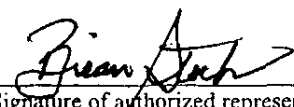
a. Granted to: BRIAN K. STOCK and/or CHAD KOCSES and/or BOB IMIG

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: BRIAN K. STOCK and/or CHAD KOCSES and/or BOB IMIG

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

BRIAN K. STOCK  
Typed or printed name of signature

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

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