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COVER LETTER

TO: Registration Section Division of Corporations		
LB 2210 Vanderbilt, LLC SUBJECT:		
	Limited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s) ar	e submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Lisa Van Dien		
Name of Person		
LB 2210 Vanderbilt, LLC		
Firm/Company		
2210 Vanderbilt Beach Road Suite 13	300	
Address		
Naples, Florida, 34109		
City/State and Zip Code		
lisavandien@londonbay.com		
E-mail address: (to be used for future an	nual report notification	1)
For further information concerning this matter, ple	ease call:	
Lisa Van Dien	239	449-1599
Name of Person	at (Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registrat	G ADDRESS: ion Section of Corporations 6327

Tallahassee, Florida 32314

CR2E138 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301

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STATEMENT OF AUTHORITY

authority	:			ability company submits the i	ollowing statell	içir oi
FIRST:	The name of	of the limited liabili	ty company is: LB 22	10 Vanderbilt, LLC		
SECON	D: The Flo	rida Document Nun	nber of the limited liabi	lity company is: L1300011	6669	
	The street	address of the limit	ed liability company's _l Road, Suite 1300	principal office is:		
	Naples,	FL 34109				
		-	mited liability company Road, Suite 1300	•	 -	
	Naples,	FL 34109				
position	of a person n the follow	in a company, whet ing:	her as a member, transf	is of authority on all persons letee, manager, officer or othe erty held in the name of the content.	erwise or to a spontage	
	a.	Lisa Van Die			2016 FEB	T.
	b.	No authority gran	ited to:		26 A 10: 2 ARY OF STAT	EO
	2. May e		rk D. Wilson, Ste	otherwise act for or bind, the ohen G. Wilson,		
	b.	No authority gran	ated to:		***************************************	
	(D)			Lisa Van Dien,	·	
Signatur	e of authori	zed representative	Filing Fee: Certified Copy:	Typed or printed n \$25.00 \$30.00 (optional)	ame of signature	е

CR2E138 (2/14)