

**L13000152247**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

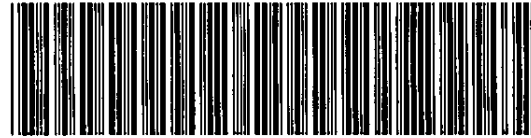
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



**200292301072**

11/18/16--01009--002 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 NOV 18 A 11:15

**FILED**

**S Warren**

**NOV 21 2016**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Golden Orb Properties, 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:

Ryan S. Campbell

Name of Person

Black Lotus, LLC

Firm/Company

911 Tuskawilla Trail

Address

Winter Springs, FL 32708

City/State and Zip Code

ryan@voxeo.com

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

For further information concerning this matter, please call:

Ryan S. Campbell

Name of Person

at ( 407 )

Area Code

835-0083

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

**Limited Liability Company  
Statement of Authority and Approval**

Pursuant to §605.0302(1) Florida Statutes, this Limited Liability Company submits the following Statement of Authority and Approval:

**FIRST:** The name of the Florida Limited Liability Company is **Golden Orb Properties, LLC.**

**SECOND:** The Florida Document Number of the Limited Liability Company is **L13000152247.**

**THIRD:** The street address of the Limited Liability Company is **911 Tuskawilla Trail, Winter Springs, FL 32708.**

The mailing address of the Limited Liability Company's principal office **911 Tuskawilla Trail, Winter Springs, FL 32708**

**FOURTH:** This Statement of Authority grants or sets limitations of authority on all persons have the status of 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: **Black Lotus, LLC.**
  - b. No authority granted to: **Any Other Party.**
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company
  - a. Granted to: **Black Lotus, LLC.**
  - b. No authority granted to: **Any Other Party.**

In Witness Whereof, I have hereunto subscribed my name as the Manager Member of the Company and affix the corporate seal pursuant to due and lawful corporate authority this \_\_\_\_\_ day of November, 2016.

Golden Orb Properties, LLC  
By: **Black Lotus, LLC**, its managing member

By:   
Ryan S. Campbell  
as Managing Member

State of Florida  
County of Lake

The foregoing instrument was acknowledged before me this 11<sup>th</sup> day of November, 2016, by Ryan S. Campbell, as the Manager Member of Black Lotus, LLC as the Managing Member and on behalf of Golden Orb Properties, LLC, a Florida limited liability company, who has produced a Florida Driver's License as identification and who did not take an oath.

  
Notary Public  
My Commission Expires **June 5, 2020**  
Nancy D. Zaccone  
Notary Public, Massachusetts  
My Commission Expires June 5, 2020