

L14 000007971

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L14-7971

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **CLAN INVESTMENT SERVICES 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:

**REBECCA BULLISTER**

Name of Person

Firm/Company

**3168 ZANDER DR**

Address

**GRAND ISLAND, FL 32735**

City/State and Zip Code

**REBECCAB5@HOTMAIL.COM**

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

For further information concerning this matter, please call:

**REBECCA BULLISTER** at ( **352** ) **602-4762**

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

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TALLAHASSEE, FLORIDA

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STATEMENT OF AUTHORITY

Pursuant to section 605.0302, Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: CLAN INVESTMENT SERVICES LLC

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

3168 ZANDER DR, GRAND ISLAND, FL 32735

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

3168 ZANDER DR, GRAND ISLAND, FL 32735

THIRD: 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: REBECCA BULLISTER and BARBARA BRUNER

b. No authority granted to: KYLE BULLISTER

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

a. Granted to: REBECCA BULLISTER and BARBARA BRUNER

b. No authority granted to: KYLE BULLISTER

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TALLAHASSEE, FLORIDA

Signature of authorized representative

Typed or printed name of signature

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