

14 0000 47165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

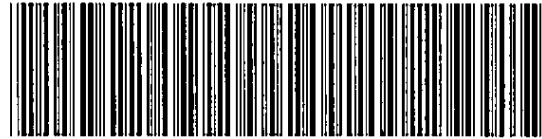
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Statement of Auth

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CARLTON DEVELOPMENT, 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:

**JEFFERY S. HILLS**

Name of Person

**CARLTON DEVELOPMENT, LLC**

Firm/Company

**111 S. ARMENIA AVE.; SUITE 201**

Address

**TAMPA, FL 33609**

City/State and Zip Code

**BROSE@EISENHOWERPROPERTYGROUP.COM**

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

For further information concerning this matter, please call:

**JEFFERY S. HILLS**

**813**

**363-4888**

at ( )

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: CARLTON DEVELOPMENT, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L14000047165

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

111 S. Armenia Ave., Suite 201

Tampa, FL 33609

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

111 S. Armenia Ave.; Suite 201

Tampa, FL 33609

**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:

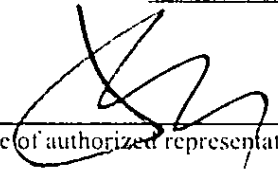
a. Granted to: NICHOLAS J. DISTER

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: NICHOLAS J. DISTER

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

  
\_\_\_\_\_  
Signature of authorized representative

JEFFERY S. HILLS

\_\_\_\_\_  
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

2019-07-11 PM 1:02