

L14000189632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2017

MARY GRETEL
12012 S SHORE BLVD
STE 102
WELLINGTON, FL 33414

SUBJECT: BELCAN LLC
Ref. Number: L14000189632

We have received your document for BELCAN LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Statement of Authority application was not included in your mailing. Please resbmit application to the Division of Corporation office.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons
Regulatory Specialist II

Letter Number: 917A00012021

RECEIVED
2017 JUN 21 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Belcan LLC, a Florida Limited Company
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:

Mary P. Gretel

Name of Person

Distinctive Title Services, Inc.

Firm/Company

12012 South Shore Boulevard, Suite 102

Address

Wellington, FL 33414

City/State and Zip Code

mgretel@distinctivetitle.com

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

For further information concerning this matter, please call:

Mary P. Gretel

at (

561

Area Code

515-0832

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: Belcan LLC, a Florida Limited Company

SECOND: The Florida Document Number of the limited liability company is: L14000189632

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

12789 Westport Circle

Wellington, Florida 33414

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

Same as above

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: Heather Dengler

b. No authority granted to: N/A

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

a. Granted to: Heather Dengler

b. No authority granted to: N/A


Signature of authorized representative—

Mary P. Gretel

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

17 JUN 21 PM 2:18
DIVISION OF CORPORATIONS

FILED