

L15000027765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

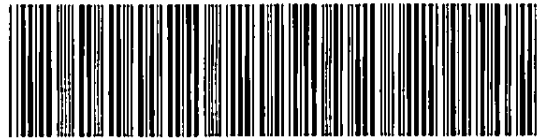
(Document Number)

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STATE OF FLORIDA  
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nan & Man, 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:

Barbara Dean

Name of Person

Nan & Man, LLC

Firm/Company

8680 Scenic Highway #11

Address

Pensacola, Florida 32514

City/State and Zip Code

Bdean112@outlook.com

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

For further information concerning this matter, please call:

BARBARA DEAN

Name of Person

at ( 850 )

Area Code

330-4489

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

SECRETARY OF STATE  
TALLAHASSEE, FL

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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: Nan & Man, LLC

SECOND: The Florida Document Number of the limited liability company is: L15000027765

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

8680 Scenic Highway #11

Pensacola, Florida 32514

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

8680 Scenic Highway #11

Pensacola, Florida 32514

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: Barbara Dean or Lawrence David Presnell, Jr.

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: Barbara Dean or Lawrence David Presnell, Jr.

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

  
Signature of authorized representative

Barbara Dean

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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CLERK OF STATE  
TALLAHASSEE, FL