

# L15000138800

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

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

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

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

☐

PICK-UP

☐

WAIT

☐

MAIL

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

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
DEC 08 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** N3 Capital Group 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:

Richard Franzblau

Name of Person

Richard Franzblau LLC

Firm/Company

1802 N Alafaya Trail

Address

Orlando, FL 32826

City/State and Zip Code

paic59@yahoo.com

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

For further information concerning this matter, please call:

Richard Franzblau

Name of Person

407

Area Code

770-2520

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(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: N3 CAPITAL GROUP LLC

SECOND: The Florida Document Number of the limited liability company is: LI 5000138800

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

6000 Island Blvd. Apt. 2304  
Aventura, FL 33160

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

P.O. Box ~~800~~ 800345  
Miami, FL 33280

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:

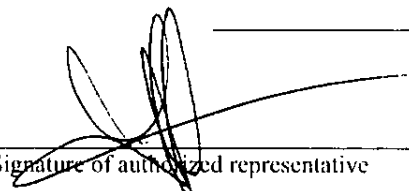
a. Granted to: PATRICIA JOHNSON

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: PATRICIA JOHNSON

b. No authority granted to: N/A

  
Signature of authorized representative

PATRICIA JOHNSON

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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