

L15000144626

(Requestor's Name) | |

(Address) | |

(Address)

(City/State/Zip/Phone #)

MAIL

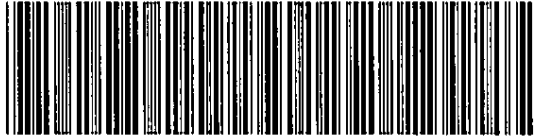
(Business Entity Name)	
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(Document Number)

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Naples, Florida 34103
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Writer's Email:
apescetto@cyklawfirm.com

November 20, 2017

VIA OVERNIGHT DELIVERY

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Statement of Authority for SD CCE, LLC, a Florida limited liability company
Document # L15000144626

Gentlemen:

Enclosed for filing please find a *Statement of Authority* for the above-referenced limited liability company. Also enclosed is our client's check payable to the Department of State in the amount of \$55.00 in payment of the filing fee, in addition to the fee for a certified copy of the filed statement.

Please return the certified copy to my attention in the enclosed prepaid FedEx envelope.

Please contact me with any questions or comments.

Sincerely,

A handwritten signature in black ink, appearing to read "Amy Pescetto". The signature is stylized with a large, looping initial "A" and a trailing flourish.

Amy Pescetto

Enclosures

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: SD CCE, LLC,

A FLORIDA LIMITED LIABILITY COMPANY

SECOND: The Florida Document Number of the limited liability company is: L15000144626

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

2639 PROFESSIONAL CIRCLE

SUITE 101

NAPLES, FLORIDA 34119

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

2639 PROFESSIONAL CIRCLE

SUITE 101

NAPLES, FLORIDA 34119

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.

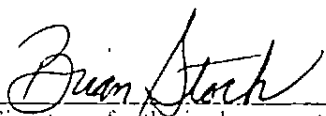
a. Granted to: JOHN FERRY

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: JOHN FERRY

b. No authority granted to: _____


Signature of authorized representative

BRIAN K. STOCK

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)