

L15000195167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

11/24/20

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE ROAD CAPTAIN 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:

CLAIRE E. COLEMAN

Name of Person

THE ROAD CAPTAIN LLC

Firm/Company

8 GUNN CIRCLE

Address

PENSACOLA, FLORIDA 32506

City/State and Zip Code

nocc@y7mail.com

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

For further information concerning this matter, please call:

Claire Coleman

Name of Person

at (850)

Area Code

748-3423

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

FILED

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: THE ROAD CAPTAIN LLC

2020 OCT 19 PM 4:35

SECRETARY OF STATE
TALLAHASSEE, FL

SECOND: The Florida Document Number of the limited liability company is: L15000195167

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

8 GUNN CIRCLE

PENSACOLA, FLORIDA 32506

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

8 GUNN CIRCLE

PENSACOLA, FLORIDA 32506

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.

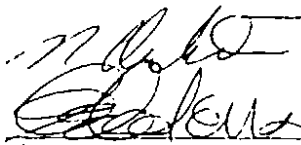
a. Granted to: NICHOLAS W. OOSTERBAAN or
CLAIRE E. COLEMAN

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 W. OOSTERBAAN or
CLAIRE E. COLEMAN

b. No authority granted to: _____



Signature of authorized representative

Nicholas W. Oosterbaan
CLAIRE E. COLEMAN

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)