

L16 000 118754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

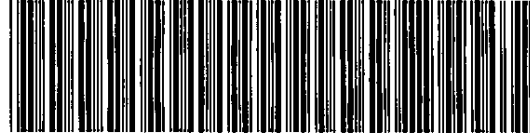
(Business Entity Name)

(Document Number)

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JUN 30 2016

S. YOUNG

**COVER LETTER**

**TO:** , Registration Section  
Division of Corporations

**SUBJECT:** GOODSON RENTALS, 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:

**DAVID W. WILCOX, Esquire**

Name of Person

**DAVID W. WILCOX, Attorney**

Firm/Company

**308 13TH STREET WEST**

Address

**BRADENTON, FL 34205**

City/State and Zip Code

**dwilcox@wilcox-law.com**

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

For further information concerning this matter, please call:

**DAVID W. WILCOX**

Name of Person

at ( **941** )

Area Code

**746-2136**

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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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: GOODSON RENTALS, LLC

SECOND: The Florida Document Number of the limited liability company is: L16000118754

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

1600 17TH STREET WEST

PALMETTO, FL 34221

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

1600 17TH STREET WEST

PALMETTO, FL 34221

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.

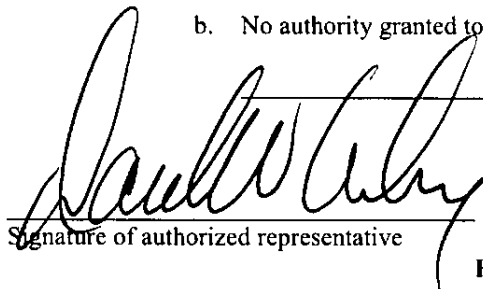
a. Granted to: MARK W. GOODSON

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: MARK W. GOODSON

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

  
Signature of authorized representative

DAVID W. WILCOX

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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