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SECRETARY OF STATE

J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: MARMARBLUE, LLC, a Florida limited liability company

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and filing fee of \$25.00 is submitted for filing. Please return all correspondence concerning this matter to the following:

MARKUS DROPPELI	MANN
Name of Manage	or
MARMARBLUE, L	LC
Name of Compan	יע
10389 Willig Ave) .
Address of Compa	iny
Englewood, FL 342	224
City/State and Zip C	ode
E-mail Address of Mai	nager

For further information concerning this matter, please call:

Susan Burke at

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2017

COURTNEY FILIZETTI BERNTSSON, ITTERSAGEN, GUNDERSON, ET AL 18401 MURDOCK CIRCLE PORT CHARLOTTE, FL 33948

SUBJECT: MARMARBLUE LLC Ref. Number: L16000186148



Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

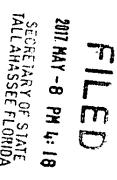
We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 817A00007619



This instrument Prepared By and Return To:
WIDEIKIS, BENEDICT & BERNTSSON, LLC - THE BIG W LAW FIRM
THE BIG W LAW FIRM
John L. Wideikis, Esq.
18401 Murdock Circle, Suite C
Port Charlotte, FL 33948



STATEMENT OF AUTHORITY

FIRST: The name of the limited liability company is: MARMARBLUE, LLC

SECOND: The Florida Document Number of the limited liability company is: L16000186148

THIRD: The street address of the limited liability company's principal office is: 10389 Willig Ave., Englewood, FL 34224

The mailing address of the limited liability company's principal office is: 10389 Willig Ave., Englewood, FL 34224

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 matters enumerated below:

- 1. May execute instruments transferring real and personal property held in the name of the company, including by way of example and not by way of limitation, Warranty Deeds, Closing Statements, Bills of Sale, Closing Affidavits and Certificates, and Closing Statement Addendums.
 - a. Granted to: MARKUS DROPPELMANN, as Manager.
 - b. No authority granted to:
- 2. May enter into other transactions on behalf of the company, or otherwise act for or bind the company in all matters, including by way of example and not by way of limitation, the pledge of company property by mortgage, security agreement or otherwise; the borrowing of money on behalf of the company through execution of promissory notes or otherwise; the execution of guaranties on behalf of the company; and the execution of any other loan documents on behalf of the company.
 - a. Granted to: MARKUS DROPPELMANN, as Manager.
 - b. No authority granted to:

The undersigned does hereby certify the accuracy of the statements set forth herein. MARKUS DROPPELMANN, as Manager Printed name and position title STATE OF FLORIDA COUNTY OF _ Charlotte_ The foregoing instrument was acknowledged before me this <u>la</u> day of <u>Janeury</u>, 2017 by MARKUS DROPPELMANN, as Manager of MARMARBLUE, LLC, a Florida limited liability company who as identification and who did is personally known to me or who has produced __________ take an oath. Notary Public, State of Florida REBECCA J. KOEHLER My Commission Expires: Commission # GG 020156 Expires August 10, 2020 (Seal) Bonded Thru Troy Fain Insurance 800-385-7019

2017 MAY -8 PM 4: 18
SECRETARY OF STATE