

L17000011415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000294792270

2017 FEB -9 A 11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RECEIVED
17 FEB -9 PM 2:39
NOTARY PUBLIC
SUFFICIENT FOR FILING

D. BRUCE
FEB 10 2017

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

850-508-1891 (cell)

Date:

2/9/17

ACCT. I20160000072

en: c SW

Name:	New Hurricane Tour
Document #:	
Order #:	10359842

Certified Copy of Arts & Amend:			
Plain Copy:			
Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination:	
		Number of Certs:	

Filing:	Certified:
	Plain:
	COGS:

Availability	_____
Document	_____
Examiner	_____
Updater	_____
Verifier	_____
W.P. Verifier	_____
Ref#	_____

Amount: \$ 55

FILED
2017 FEB - 9 A.M. 11:00
TALLAHASSEE, FL 32312
\$ 25
\$ 30
\$ 155

Thank you!

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 The New Hurricane Tour, LLC (the "Company").

SECOND: The Florida Document Number of the Company is L17000011415.

THIRD: The street address of the Company is:

9350 Conroy Windermere Road
Windermere, FL 34786

The mailing address of the Company is:

9350 Conroy Windermere Road
Windermere, FL 34786

FOURTH: The ability of a person in the Company, whether as a member, transferee, manager, officer or otherwise or to a specific person (1) to execute an instrument transferring real property held in the name of the Company or (2) to enter into other transactions on behalf of, or otherwise act for or bind, the Company are subject to those restrictions contained in the Limited Liability Company Agreement of the Company, a copy of which is on file at the principal place of business of the Company.

IN WITNESS WHEREOF, the undersigned has executed this Statement of Authority this 9th day of February, 2017.



Mario C. Conte
Chief Executive Officer

FILED
2017 FEB - 9 A 11: 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA