

**L17000025030**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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PICK-UP

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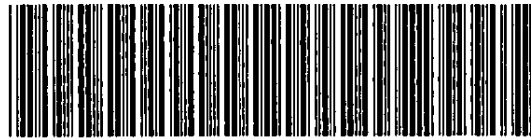
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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MAR 01 2017  
S. YOUNG

**COVER LETTER**

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

**SUBJECT:** Mowbray Investments, 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:

**Steven E. Wegner**

Name of Person

**Mowbray Investments, LLC**

Firm/Company

**2716 NW 31st Terrace**

Address

**Gainesville, FL 32605**

City/State and Zip Code

**sew@ncaccesscare.org**

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

For further information concerning this matter, please call:

**Steven E. Wegner**

**919**

**623-5139**

at ( )

Name of Person

Area Code

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: Mowbray Investments, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L17000025030

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

2716 NW 31st Terrace

Gainesville, FL 32605

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

2716 NW 31st Terrace

Gainesville, FL 32605

**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: Steven E. Wegner

Lynn M. Wegner

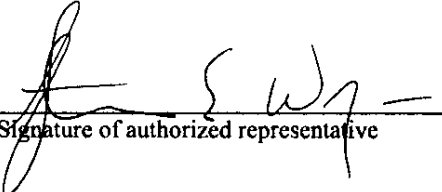
b. No authority granted to: \_\_\_\_\_

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Steven E. Wegner

Lynn M. Wegner

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

  
Signature of authorized representative

Steven E. Wegner

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

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