

L22000506410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

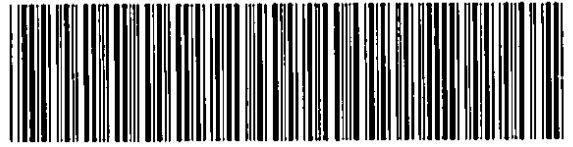
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 MAY -9 AM 8:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Proud Pelican Charters 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:

Robert M. Shaw

Name of Person

Proud Pelican Charters LLC

Firm/Company

1105 Clara Avenue, Apt 1406

Address

Panama City Beach, Florida 32407

City/State and Zip Code

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

For further information concerning this matter, please call:

Robert M. Shaw

Name of Person

850

Area Code

333-0636

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

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: Proud Pelican Charters LLC

SECOND: The Florida Document Number of the limited liability company is: L22000506410

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

7895 Evening Glow Drive

Pensacola, Florida 32507

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

1105 Clara Avenue

Apt. 1406

Panama City Beach, Florida 32407

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

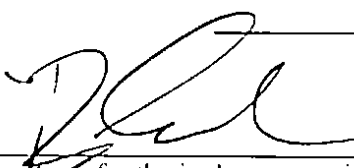
a. Granted to: Robert M. Shaw - Manager

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: Robert M. Shaw - Manager

b. No authority granted to: _____



Signature of authorized representative

Robert M. Shaw

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)