

L99000002158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

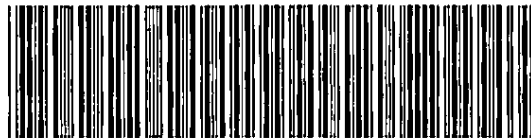
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500309981945

03/06/18--01017--019 \*\*25.00

FILED

18 MAR -6 PM 1:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

✓ SALY  
MAR -7 2018

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: North Cape Projects, 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 Barton  
Name of Person

North Cape Projects, LLC  
Firm Company

2534 NE 9th Ave., Unit 1  
Address

Cape Coral, FL 33909  
City State and Zip Code

ncapematerial@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call

David Barton at ( 239 ) 772-9994 9889  
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

## 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: North Cape Projects, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L99000002158

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

2534 NE 9th Ave., Unit 1

Cape Coral, FL 33909

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

2534 NE 9th Ave., Unit 1

Cape Coral, FL 33909

FILED  
MAR -6 PM 1:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: David Barton

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: David Barton

b. No authority granted to:                     

  
Signature of authorized representative

David Barton  
Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)