

L:10000090284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

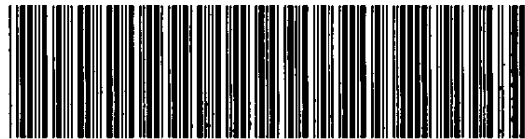
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900285288279

05/03/16--01037--005 **25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY -3 PM 3:48

MAY 04 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BD REAL ESTATE INVESTING, LLC**
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:

RICHARD C. HARMS

Name of Manager

BD Real Estate Investing, LLC

Name of Company

2636 Myakka Marsh Lane

Address of Company

Port Charlotte, FL 33953

City/State and Zip Code

rich.harms@aol.com

E-Mail Address of Manager

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
16 MAY -3 PM 3:48

For further information concerning this matter, please call:

Jessica Dull at (941) 627-1000

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

This Instrument Prepared by & Return to:
John L. Wideikis
Berntsson, Ittersagen, Gunderson & Wideikis, LLP
THE BIG W LAW FIRM
18401 Murdock Circle, Suite C
Port Charlotte, FL 33948

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 18th day of April, 2016, and same shall be effective for a period of five (5) years from the date of this Statement unless sooner terminated as so permitted by law:

FIRST: The name of the limited liability company is: **BD REAL ESTATE INVESTING, LLC**

SECOND: The Florida Document Number of the limited liability company is: **L010000090284**

THIRD: The street address of the limited liability company's principal office is: **2636 Myakka Marsh Lane, Port Charlotte, FL 33953**

The mailing address of the limited liability company's principal office is: **2636 Myakka Marsh Lane, Port Charlotte, FL 33953**

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: **RICHARD C. HARMS**, 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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 APR -3 PM 3:48

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.

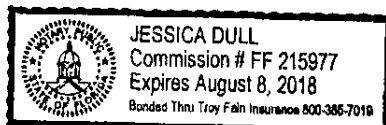
- a. Granted to: RICHARD C. HARMS, as Manager.
b. No authority granted to:

The undersigned does hereby certify the accuracy of the statements set forth herein.

Richard C. Harms
Signature of authorized representative

RICHARD C. HARMS, Member & Manager
Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this 18th day of April, 2016, by **RICHARD C. HARMS**, who is personally known to me, or who has provided FCWP, to establish his or her identity to me.



[Signature]

Print Name: _____
Notary Public
My commission expires: _____

[SEAL]

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY -3 PM 3:48