

L01000019324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

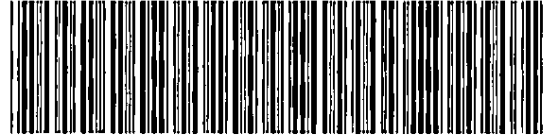
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CT CORP
(850)656-4724
3458 Lakeshore Drive,
Tallahassee, FL 32312

Date: 07/20/2023
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en: c DW

Name:	DIXON HOLDINGS, LLC
Document #:	
Order #:	15042733

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
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Amount: \$ **25.00**

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: DIXON HOLDINGS, LLC

SECOND: The Florida Document Number of the limited liability company is: 1.01000019324

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

436 Calbira Ave

North Port, FL 34287

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

436 Calbira Ave

North Port, FL 34287

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: Roberta E. Masnyj

b. No authority granted to: Renata Angioli

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

a. Granted to: Roberta E. Masnyj

b. No authority granted to: Renata Angioli

Roberta Masnyj
Signature of authorized representative

Roberta E. Masnyj
Typed or printed name of signature

Filing Fee: **\$25.00**
Certified Copy: **\$30.00 (optional)**