

LOS 000 MS107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

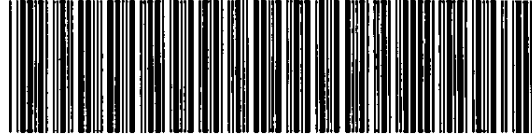
(Business Entity Name)

(Document Number)

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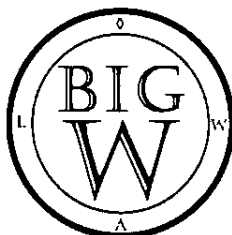
S. YOUNG

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TALLAHASSEE, FLORIDA
16 AUG 16 PM 12:41

BERNTSSON, ITTERSAGEN, GUNDERSON & WIDEIKIS, LLP
THE BIG W LAW FIRM
ATTORNEYS AT LAW

ROBERT C. BENEDICT
ROBERT H. BERNTSSON
MIKO P. GUNDERSON
SCOTT D. ITTERSAGEN
JOHN L. WIDEIKIS

431 PALM AVENUE
P.O. BOX 752
BOCA GRANDE, FLORIDA 33921
PHONE: (941) 964-1223
TELEFAX (941) 964-0654



18401 MURDOCK CIRCLE
PORT CHARLOTTE, FLORIDA 33948
PHONE: (941) 627-1000
TELEFAX (941) 255-0684
E-MAIL: jessicad@bigwlaw.com

1861 PLACIDA ROAD, SUITE 204
ENGLEWOOD, FLORIDA 34223
PHONE: (941) 474-7713
TELEFAX (941) 474-8276
E-MAIL

Reply To: Port Charlotte

August 8, 2016

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF
TALLAHASSEE, FLORIDA
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RE: L05000118107 - LBL Properties, LLC and
L04000037122 - Shadow S.J. Ward, LLC

To Whom it May Concern;

Enclosed you will find our check number 1011249 in the amount of \$50.00 along with a Cover Letter and Statement of Authority for the above referenced matters.

Please let me know if you need anything further.

Sincerely,

Jeanette B. Goff
Real Estate Assistant

Enclosures

20161007

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LBL PROPERTIES, 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:

JOHN LUM
Name of Manager

LBL PROPERTIES, LLC
Name of Company

2811 Baypointe Circle
Address of Company

Tampa, FL 33611
City/State and Zip Code

lanaandjohn@hotmail.com
E-Mail Address of Manager

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 AUG 16 PM 12:41

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

FILED
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TALLAHASSEE, FLORIDA
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STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 26th day of ~~March~~ July, 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: **LBL PROPERTIES, LLC**

SECOND: The Florida Document Number of the limited liability company is: **L05000118107**

THIRD: The street address of the limited liability company's principal office is: **2811 Baypointe Circle, Tampa, FL 33611**

The mailing address of the limited liability company's principal office is: **2811 Baypointe Circle, Tampa, FL 33611**

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.

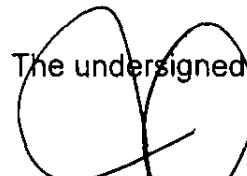
- a. Granted to: JOHN LUM, as Manager.
- b. No authority granted to:

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 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: JOHN LUM, as Manager.
- b. No authority granted to:


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



Signature of authorized
Representative

JOHN LUM, as Manager and Member
Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this 20th
day of JULY, 2016, by **JOHN LUM**, who is personally known to me, or who
has provided a driver's license, to establish his or her identity to me.



Print Name: Jessica Dittmer
Notary Public
My commission expires: 10/3/2016

[SEAL]



JESSICA DITTMER
NOTARY PUBLIC
STATE OF FLORIDA
Comm# EE840488
Expires 10/3/2016

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TALLAHASSEE, FLORIDA