

LOG 0000041016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

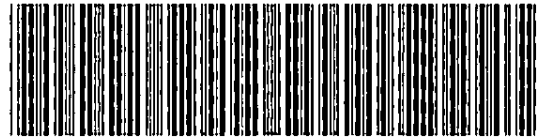
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

2021 AUG 19 AM 7:09

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S & W PARTNERS, 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:

MURRAY R. WISE

Name of Manager

S & W PARTNERS, LLC.,

Name of Company

4309 CRAYTON ROAD

Address of Company

Naples, FL 34103

City/State and Zip Code

E-mail Address of Manager

For further information concerning this matter, please call: 941-627-1000

Tiffany Pride at

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RECORDED IN OFFICIAL RECORDS
INSTRUMENT # 2021150810 2 PG(S)

8/16/2021 3:15 PM

KAREN E. RUSHING

CLERK OF THE CIRCUIT COURT

SARASOTA COUNTY, FLORIDA

This instrument Prepared By and Return To:
WIDEIKIS, BENEDICT & BERNTSSON, LLC - THE BIG W LAW FIRM
John L. Wideikis, Esq.
3195 S. Access Road
Englewood, FL 34224

SIMPLIFILE

Receipt # 2725993

SECTIONARY OF STATE
TALLAHASSEE, FL

2021 AUG 19 AM 7:09

FILED

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 17th day of AUGUST, 2021, 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:

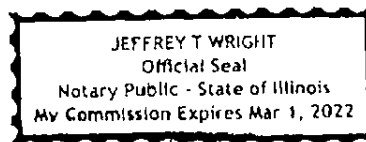
- FIRST: The name of the limited liability company is: **S & W PARTNERS, LLC.**, a Florida Limited Liability Company
- SECOND: The Florida Document Number of the limited liability company is: **L06000041016**
- THIRD: The street address of the limited liability company's principal office is: **4309 CRAYTON ROAD, Naples, FL 34103**
- The mailing address of the limited liability company's principal office is: **4309 CRAYTON ROAD, Naples, FL 34103**
- 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: **MURRAY R. WISE**, 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: **MURRAY R. WISE**, as Manager.
 - b. No authority granted to:

Signature of authorized representative

STATE OF ILLINOIS
COUNTY OF CHAMPAIGN

Notary Public, State of _____
My Commission Expires: 3/1/2022
(Seal)



This instrument Prepared By and Return To:
WIDEIKIS, BENEDICT & BERNTSSON, LLC - THE BIG W LAW FIRM
John L. Wideikis, Esq.
3195 S. Access Road
Englewood, FL 34224

FILED
2021 AUG 19 AM 7:09
SECRETARY OF STATE
TALLAHASSEE, FL

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 9TH day of AUGUST, 2021, 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: **S & W PARTNERS, LLC., a Florida Limited Liability Company**

SECOND: The Florida Document Number of the limited liability company is: **L06000041016**

THIRD: The street address of the limited liability company's principal office is: **4309 CRAYTON ROAD, Naples, FL 34103**

The mailing address of the limited liability company's principal office is: **4309 CRAYTON ROAD, Naples, FL 34103**

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: **MURRAY R. WISE**, 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: **MURRAY R. WISE**, as Manager.
 - b. No authority granted to:

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

Y [Signature]
Signature of authorized representative

MURRAY R. WISE, as Manager
Printed name and position title

Y STATE OF ILLINOIS

COUNTY OF CHAMPAIGN

The foregoing instrument was acknowledged before me by means of X physical presence or ___ online notarization, this 9th day of August, 2021 by MURRAY R. WISE, as Manager of S & W PARTNERS, LLC., a Florida Limited Liability Company, who is/are personally known to me or who has/have produced _____ as identification and who did take an oath.

[Signature]
Notary Public, State of
My Commission Expires: 3/1/2022
(Seal)

JEFFREY T WRIGHT
Official Seal
Notary Public - State of Illinois
My Commission Expires Mar 1, 2022