

L070000003780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

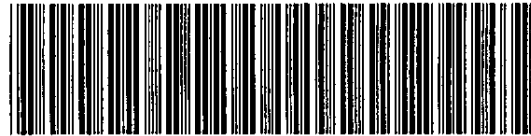
(Business Entity Name)

(Document Number)

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2017 JUN 14 A 11:05

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**D. BRUCE
JUN 15 2017**

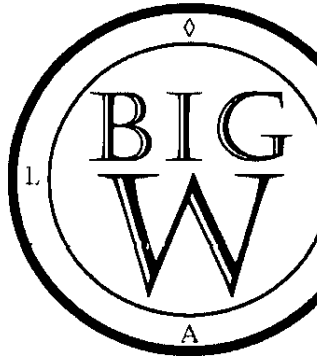
WIDEIKIS, BENEDICT & BERNTSSON, LLC

THE BIG W LAW FIRM

ATTORNEYS AT LAW

JOHN L. WIDEIKIS
ROBERT C. BENEDICT
ROBERT H. BERNTSSON

HEADQUARTERS
3195 S. ACCESS ROAD
ENGLEWOOD, FLORIDA 34224
PHONE: (941) 627-1000
EMAIL: JGoff@BigWLaw.com



4301 AIDAN LANE
NORTH PORT, FLORIDA 34287
PHONE: (941) 627-1000

333 PARK AVENUE, UNIT 2A
P.O. BOX 483
BOCA GRANDE, FLORIDA 33921
PHONE: (941) 627-1000

June 7, 2017

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: AIP Enterprises, LLC – L07000003780

To Whom it May Concern;

Enclosed you will find our check number 4240 in the amount of \$25.00 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
2017-5621JLW

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **AIP ENTERPRISES, 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:

ARMAND PINARD
Name of Manager

AIP ENTERPRISES, LLC
Name of Company

15578 Meacham Circle
Address of Company

Port Charlotte, FL 33981
City/State and Zip Code

irenepinard@yahoo.com
E-Mail Address of Manager

For further information concerning this matter, please call:

Cynthia M. Ehlke 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

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2017 JUN 14 A 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Instrument Prepared by & Return to:
John L. Wideikis
WIDEIKIS, BENEDICT & BERNTSSON, LLC
THE BIG W LAW FIRM
18401 Murdock Circle, Suite C
Port Charlotte, FL 33948

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2017 JUN 14 A 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 15th day of June, 2017, 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: **AIP ENTERPRISES, LLC**

SECOND: The Florida Document Number of the limited liability company is: **L07000003780**

THIRD: The street address of the limited liability company's principal office is: **15578 Meacham Circle, Port Charlotte, FL 33981**

The mailing address of the limited liability company's principal office is:
15578 Meacham Circle, Port Charlotte, FL 33981

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 **ARMAND PINARD**, 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.

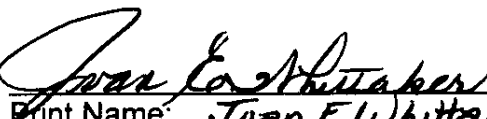
- a. Granted to: **ARMAND PINARD**, as Manager.
- b. No authority granted to:

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


Signature of authorized representative

ARMAND PINARD, Manager
Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this 15th
day of June, 2017, by **ARMAND PINARD**, who is personally known to me,
or who has provided drv. lic, to establish his or her identity to me.


Print Name: Joan E. Whittaker

Notary Public

My commission expires:



[SEAL]

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TALLAHASSEE, FLORIDA