

LD7000018654

(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



500308837015

FILED

18 FEB 22 AM 8:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2010 FEB 22 AM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

© SIMMONS

FEB 23 2010

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 080247 7354150

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : February 21, 2018

ORDER TIME : 9:22 AM

ORDER NO. : 080247-005

CUSTOMER NO: 7354150

FOREIGN FILINGS

NAME: MAVERICK PROPERTIES OF POLK  
COUNTY, LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_

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: Maverick Properties of Polk County, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L07000018654

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

4680 NE Sandpebble Trace #402

Stuart, Florida 34996

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

4680 NE Sandpebble Trace #402

Stuart, Florida 34996

**FOURTH:** This statement of authority grants or sets limitations of authority on all persons having the status of a person in a company, whether as a member, transferee, manager, officer or otherwise or on a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.


a. Granted to: Ted Barnett, Daniel B. Green

b. No authority granted to: \_\_\_\_\_

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

a. Granted to: Ted Barnett, Daniel B. Green

b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

Ted Barnett

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

FILED  
18 FEB 28 AM 8:39  
TALLAHASSEE  
SECRETARY OF STATE  
FLORIDA