108000)83484

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:

MID REAL ESTATE, 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:

MINDAOUGAS NETCHIOUNAS

Name of Manager

MID REAL ESTATE, LLC

Name of Company

8066 Wiltshire Drive

Address of Company

Port Charlotte, Florida 33981

City/State and Zip Code

Minja07@msn.com

E-Mail Address of Manager

For further information concerning this matter, please call:

Katrina Rydzenski 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

Form Identification CR2E138 (2/14)

This Instrument Prepared by & Return to: John L. Wideikis Wideikis, Benedict & Berntsson, LLC THE BIG W LAW FIRM 3195 S. Access Road Englewood, FL 34224

STATEMENT OF AUTHORITY

18 NO 29 PH 3: 32

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this ______ day of _______, 2018, 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: MID REAL ESTATE, LLC

SECOND: The Florida Document Number of the limited liability company is: L08000083484

THIRD: The street address of the limited liability company's principal office is: 8066 Wiltshire Drive, Port Charlotte, Florida 33981

The mailing address of the limited liability company's principal office is: 8066 Wiltshire Drive, Port Charlotte, Florida 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 MINDAOUGAS NETCHIOUNAS, as Manager, and INESSA NETCHIOUNAS, 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: MINDAOUGAS NETCHIOUNAS, as Manager, and INESSA NETCHIOUNAS, as Manager.

b. No authority granted to:

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

signature of authorized representative

Signature of authorized representative

MINDAOUGAS NETCHIOUNAS, Manager

Printed name and position title

INESSA NETCHIOUNAS, Manager

Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this day of August, 2018, by MINDAOUGAS NETCHIOUNAS and INESSA NETCHIOUNAS, who are personally known to me, or who have provided, to establish their identity to me.

ALISON MARSICOVETERE
Commission # GG 116612
Expires June 19, 2021
Bondod Thru Troy Fain Insurance 800-385-7019

Print Name:_

Notary Public

My commission expires:

[SEAL]