

L080000091945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

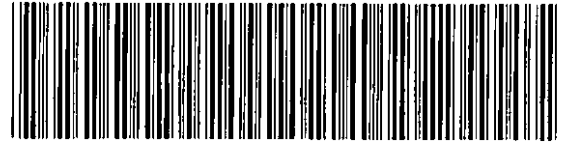
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Statement of  
Authority

FILED  
2023 OCT 16 PM 12:00  
TALLAHASSEE, FLORIDA

RECEIVED  
2023 OCT 16 AM 10:29  
TALLAHASSEE, FLORIDA

A. RAMSEY  
OCT 17 2023

**CT CORP**  
**(850) 656- 4724**  
**3558 lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 10/16/2023

Acc#I20160000072

*en: c DW*

Name:	Commerce Way Property LLC
Document #:	
Order #:	15172144

Certified Copy of Arts & Amend:	<input type="checkbox"/>			
Plain Copy:	<input type="checkbox"/>			
Certificate of Good Standing:	<input type="checkbox"/>			
Certified Copy of	<input type="checkbox"/>			
Apostille/Notarial Certification:	<input type="checkbox"/>		Country of Destination:	
			Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
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Email Address for Annual Report Notifications:

Availability \_\_\_\_\_

Document \_\_\_\_\_

Examiner \_\_\_\_\_

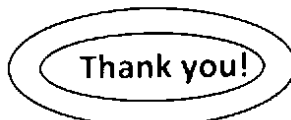
Updater \_\_\_\_\_

Verifier \_\_\_\_\_

W.P. Verifier \_\_\_\_\_

Ref# \_\_\_\_\_

Amount: \$ **25.00**



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: Commerce Way Property LLC

SECOND: The Florida Document Number of the limited liability company is: L08000091945

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

5969 Cattleridge Blvd

Suite 102

Sarasota, FL 34232

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

5969 Cattleridge Blvd

Suite 102

Sarasota, FL 34232

FILED  
2023 OCT 16 PM 12:00  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

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:

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

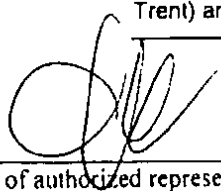
a. Granted to: Jennifer T. Trent

b. No authority granted to: John S. Trent (a/k/a John Stuart Trent or John Trent) and/or Rhoda Delucia Trent (a/k/a Rhoda D. Trent, Rhoda Trent or Angie Trent)

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

a. Granted to: Jennifer T. Trent

b. No authority granted to: John S. Trent (a/k/a John Stuart Trent or John Trent) and/or Rhoda Delucia Trent (a/k/a Rhoda D. Trent, Rhoda Trent or Angie Trent)



Signature of authorized representative

Jennifer T. Trent

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)