

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002361213)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STANLEY A. GOLDSMITH, ATTORNEY AT LAW

Account Number : I200000000069 Phorie : (94%)955-4990 fax Number : (941)955-4997

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* 🖑

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 2223 SALFORD, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

D. SCOTT SEP 2 3 2016 Sep. 22. 2016 2:49PM S. Goldsmith Atty. ((H16000236121 3)))

## STATEMENT OF AUTHORITY OF 2223 Salford, LLC

## A Florida Limited Liability Company, FL Doc No. L09000029486

State of Florida

County of Sarasota) ss:

i. Pursuant to section 605.0302(1), Florida Statutes, this Limited Liability Company submits the following Statement of Authority:

<u>FIRST</u>: The name of the Company as it appears on the records of the Florida Department of State is 2223 Salford, LLC (hereinafter the Company).

SECOND: The Florida Document Number of the Limited Liability Company is L09000029486

THIRD: The street address of the principal place of business of the Company is 2066 Jameson. Av. North Port FL, 34286.

FOURTH: The mailing address of the principal place of business of the Company is 2066 Jameson Avenue, North Port FL, 34286.

FIFTH: The Company owns the following property located in Sarasota County, Florida:

Lot 24, Block 290, 1st addition to Port Charlotte Subdivision, according to the plat thereof, recorded in Plat Book 11, Pages 29 and 29A thru 29J, of the Public Records of Sarasota County, Florida.

a/k/a 2223 Salford Blvd 5, North Port, Florida 34290, Parcel ID #: 0989-02-9024

<u>SIXTH:</u> 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:

A: The only person with the authority to execute any instrument transferring real Property held in the name of the Company, to lease any real Property of the Company, to withdraw funds from any bank account of the Company and/ or to borrow funds on behalf of the company is NINA PASHTENKO, 2066 Jameson Ave. North Port, FL 34286.

B: NINA PASHTENKO and VALENTIN PASHTENKO, whose address is 4675 Kenoska Street North Port, FL 34286 are each individually authorized to manage and/ or maintain real Property owned by the

(((H16000236121 3)))

N.P.M

(((H16000236121 3)))

Company. Their authority in such regard shall include, without limitation, authority to collect rents for any real Property owned by the Company, file applications with governmental authorities, enter upon and inspect any Real Property owned by the Company and negotiate and enter into Contracts for the maintenance, insurance, renovation, improvement and/ or repair of any real Property owned by the Company.

C: Except as otherwise expressly stated herein, the only person with authority to enter into other transactions on behalf or otherwise act for or bind the Company is NINA PASHTENKO, 2066 Jameson Ave. North Port, FL 34286.

SEVENTH: No authority of any nature whatsoever to act on behalf of the Company is granted to CYNTHIA PASHTENKO, who ceased being a Manager of the Company on August 23, 2013. As a result, after August 23, 2013 CYNTHIA PASHTENKO had and has no authority of any nature whatsoever to (i.) execute any instrument transferring real Property held in the name of the Company, or (ii.) enter into any other transactions on behalf of or otherwise bind the Company. Therefore, on and after August 24, 2013 CYNTHIA PASHTENKO has not had and does not have, without limitation, any of the following authority: to (i.) execute an instrument transferring real Property held in the name of the Company (ii.) conduct any banking transactions on behalf of the Company, (iii.) bind the Company to or execute, on behalf of the Company, (a.) any Lease, (b.) any Lease Termination or Extension Agreement, (c.) any Contract of sale, (d.) any Option Agreement, (e.) any Listing Agreement, (f.) any application pertaining to such Property or (g.) any Contract to insure, maintain, or improve real Property owned by the Company. CYNTHIA PASHTENKO is specifically prohibited from and lacks the authority to collect any funds on behalf of the Company including without limitation any rents, security deposits, application fees, settlements, and/or refunds. CYNTHIA PASHTENKO is also prohibited from (I.) contacting or communicating with any tenant, prospective tenant, former tenant, contractor, or agent of the Company in any manner whatsoever relating, referring, or in any way pertaining to the business and/ or operations of the Company and any Property owned by it, whether in person, by telephone, by mail, by internet or otherwise or (ii.) entering on or about any real Property owned by the Company for any purpose whatsoever and her doing so shall constitute a trespass for which CYNTHIA PASHTENKO is subject to removal, liability for damages, and all other appropriate relief to which the Company may be entitled pursuant to applicable law.

EIGHTH: In accordance with Florida Statute 605.0302 (7), as the same may be amended from time to time, the Company may record a certified copy of this Statement of Authority in the Public Record of Sarasota County, Florida such that all persons shall be deemed to know of the limitations contained therein.

Sep. 22. 2016 2:50PM S. Goldsmith Atty. (((H16000236121 3)))

> In witness whereof, NINA PASHTENKO as Authorized Signer of the Company and VALENTIN PASHTENKO as Authorized Signer of the Company have executed this Statement of Authority for the uses and purposes set forth herein as of the last date below written

NINA PASHTENKO, Authorized Signer

VALENTIN PASHTENKO, Authorized Signer

DATE

Before me, the undersigned authority, personally appeared NINA PASHTENKO as Authorized Signer of the Company and VALENTIN PASHTENKO as Authorized Signer of the Company, who after being duly cautioned and sworn, acknowledged that all matters set forth in the foregoing Statement of Authority are true and correct to the best of their knowledge and belief.

Sworn to and subscribed before me on this 224 day of

Signature of Notary Public

(Print Notary Name)

My Commission Expires:

Commission No.: FF934412

[] Personally known, or

Produced Identification

Type of Identification Produced

deivers license

-3-

(((H16000236121 3)))