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## 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:



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

October 27, 2017

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: DEF PROPERTIES, LLC

To Whom it May Concern:

Enclosed please find our trust account check number 7405 in the amount of \$25.00 made payable to you in order to file the Statement of Authority for the above referenced company.

Please let me know if I can be of further assistance.

Sincerely,

Alison Marsicovetere Real Estate Closer

Enclosures 2017-51190JWC

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: DEF PROPERTIES, 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. P correspondence concerning this matter to the following:	lease return a	all
DANIEL E. FARRIS		
Name of Manager	_	
DEF PROPERTIES, LLC		
Name of Company	-	
107 Linden Ln.		
Address of Company		
Springfield, IL 62712		
City/State and Zip Code	, ,	
dfarrsi4087@hotmail.com		
E-mail Address of Manager		

For further information concerning this matter, please call:

Alison Marsicovetere at 941-627-1000 ext 2005

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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## E-FILED

This instrument Prepared By and Return To: WIDEIKIS, BENEDICT & BERNTSSON, LLC THE BIG W LAW FIRM
John L. Wideikis, Esq.
3195 S. Access Road
Englewood, FL 34224

#### STATEMENT OF AUTHORITY

Pursuant to 605 0302. Florida Statutes, this limited liability company submits the following statement of authority on this 24th day of October, 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: DEF PROPERTIES, LLC

SECOND: The Florida Document Number of the limited liability company is: L11000049475

THIRD: The street address of the limited liability company's principal office is: 107 Linden Ln., Springfield, IL 62712

The mailing address of the limited liability company's principal office is: 107 Linden Ln., Springfield, IL 62712

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:

- 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: DANIEL E. FARRIS, 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: DANIEL E. FARRIS, as Manager
  - b. No authority granted to:

Signature of authorized representative Printed name and position title

State of ILLINIOS
County of SANGRIMM

The foregoing instrument was acknowledged before me this PARRIS, MANAGER of DEF PROPERTIES, LLC, a Florida limited liability company who is personally known to me or who has produced IL Daniels were as identification and who did take an oath

Notary Public, State of My Commission Expires: 11/7/2017 (Seal)

OFFICIAL SEAL DYLAN HARDIN NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES NOV. 7, 17

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

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