

L110000 71911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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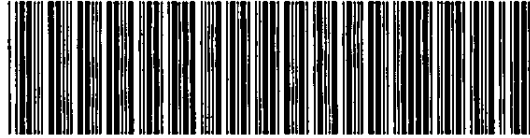
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 07 2016
J. HARRIS

BERNTSSON, ITTERSAGEN, GUNDERSON & WIDEIKIS, LLP
THE BIG W LAW FIRM
ATTORNEYS AT LAW

ROBERT C. BENEDICT
ROBERT H. BERNTSSON
MIKO P. GUNDERSON
SCOTT D. ITTERSAGEN
JOHN L. WIDEIKIS

431 PALM AVENUE
P.O. BOX 752
BOCA GRANDE, FLORIDA 33921
PHONE: (941) 964-1223
TELEFAX (941) 964-0654



18401 MURDOCK CIRCLE
PORT CHARLOTTE, FLORIDA 33948
PHONE: (941) 627-1000
TELEFAX (941) 255-0684
E-MAIL: jessicad@bigwlaw.com

1861 PLACIDA ROAD, SUITE 204
ENGLEWOOD, FLORIDA 34223
PHONE: (941) 474-7713
TELEFAX (941) 474-8276
E-MAIL

Reply To: Port Charlotte

March 28, 2016

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: L11000071911 - Wincher Investments, LLC

To Whom it May Concern;

Enclosed you will find our check number 106211 in the amount of \$25.00 along with a Cover Letter and Statement of Authority for the above referenced matters.

Please let me know if you need anything further.

Sincerely,

Jeanette B. Goff
Real Estate Assistant

Enclosures
20160311

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WINCHER INVESTMENTS, 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:

Ronald F. Stanek

Name of Manager

Wincher Investments, LLC

Name of Company

7201 Waters Way

Address of Company

Englewood, FL 34224

City/State and Zip Code

tallpinesinfo@yahoo.com

E-Mail Address of Manager

For further information concerning this matter, please call:

Jessica Dull 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

This Instrument Prepared by & Return to:
John L. Wideikis
Bertsson, Ittersagen, Gunderson & Wideikis, LLP
THE BIG W LAW FIRM
18401 Murdock Circle, Suite C
Port Charlotte, FL 33948

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TALLAHASSEE, FLORIDA

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 17th day of March, 2016, 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: **WINCHER INVESTMENTS, LLC**

SECOND: The Florida Document Number of the limited liability company is: **L11000071911**

THIRD: The street address of the limited liability company's principal office is: **7201 Waters Way, Englewood, FL 34224**

The mailing address of the limited liability company's principal office is: **7201 Waters Way, Englewood, FL 34224**

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: RONALD F. STANEK and/or CHERYL A. STANEK,
as Managers.

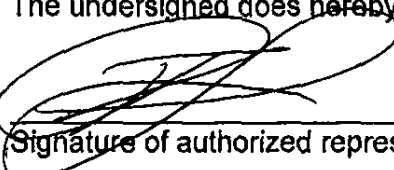
b. No authority granted to:

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: RONALD F. STANEK and/or CHERYL A. STANEK
as Managers.

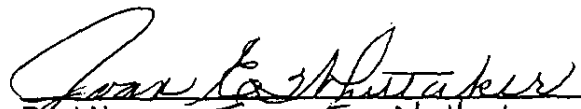
b. No authority granted to:

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


Signature of authorized representative

RONALD F. STANEK, Member & Manager
Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this 17th
day of March, 2016, by RONALD F. STANEK, who is personally known to
me, or who has provided _____, to establish his or her identity to me.


Print Name: Joan E. Whittaker
Notary Public
My commission expires:



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TALLAHASSEE, FLORIDA