

11000100848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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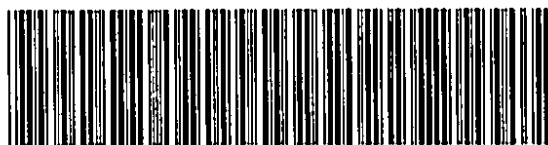
(Business Entity Name)

(Document Number)

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Statement of
Authority

MAR 23 2019

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **DS GREVE, 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:

TERESA MCCOY

Name of Manager

DS GREVE, LLC

Name of Company

21178 Rhone Place

Address of Company

Apple Valley, CA 92308

City/State and Zip Code

E-mail Address of Manager

For further information concerning this matter, please call:

Cindy Ehlke 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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 MAR 13 PM 2:41

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

RECEIVED
CLERK OF DISTRICT COURT
19 MAR 13 PM 2:41

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 7th day of MARCH, 2019, 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: **DS GREVE, LLC**

SECOND: The Florida Document Number of the limited liability company is: **L11000100848**

THIRD: The street address of the limited liability company's principal office is: **21178 Rhone Place, Apple Valley, CA 92308**

The mailing address of the limited liability company's principal office is: **21178 Rhone Place, Apple Valley, CA 92308**

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: **TERESA MCCOY**, 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: **TERESA MCCOY**, as Manager.
 - b. No authority granted to:

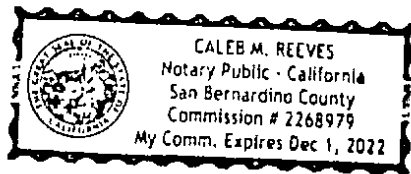
The undersigned does hereby certify the accuracy of the statements set forth herein.

Teresa L. McCoy 3/7/2019 TERESA MCCOY, as Manager
Signature of authorized representative Printed name and position title

STATE OF California

COUNTY OF San Bernardino

The foregoing instrument was acknowledged before me this 7 day of March, 2019
by TERESA L. MCCOY, as Manager of DS GREVE, LLC, who is/are personally known to me or who
has/have produced Ca Drivers License as identification and who did take an oath.



Caleb M. Reeves
Notary Public, State of
My Commission Expires:
(Seal)