

L12000130904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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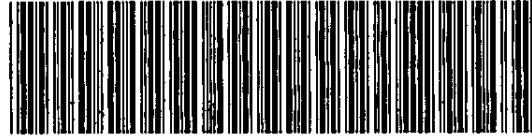
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 08 2016
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **TRADEWINDS LUXURY HOMES, 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:

DAVID D. JOHNSTON
Name of Manager

TRADEWINDS LUXURY HOMES, LLC
Name of Company

8133 Agate Street
Address of Company

Port Charlotte, FL 33946
City/State and Zip Code

djohnston600@gmail.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

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TALLAHASSEE, FLORIDA

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

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 23rd 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: **TRADEWINDS LUXURY HOMES, LLC**

SECOND: The Florida Document Number of the limited liability company is: **L12000130904**

THIRD: The street address of the limited liability company's principal office is: **8133 Agate Street, Port Charlotte, FL 33981**

The mailing address of the limited liability company's principal office is:
P. O. Box 329, Placida, FL 33946

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 **DAVID D. JOHNSTON**, 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

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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.

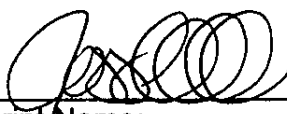
- a. Granted to: **DAVID D. JOHNSTON**, as Manager.
- b. No authority granted to:

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


Signature of authorized representative

DAVID D. JOHNSTON, Manager
Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this 23rd day of March, 2016, by **DAVID D. JOHNSTON**, who is personally known to me, or who has provided Fid, to establish his or her identity to me.


Print/Name: _____
Notary Public
My commission expires:

[SEAL]



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