L13000004184

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Business Entity Name) |
| (Decument Number) |
| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:

ANDERSUN RENTALS, 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:

| KEVIN S. ANDERSON |
|---------------------------|
| Name of Manager |
| ANDERSUN RENTALS, LLC |
| Name of Company |
| 99 Nebsbit Street |
| Address of Company |
| Punta Gorda, FL 33950 |
| City/State and Zip Code |
| Ka 140 Dicloud, com |
| F-mail Address of Manager |

For further information concerning this matter, please call:941-627-1000 (2016)

Tiffany Pride

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

ROGER D. EATON, CHARLOTTE COUNTY CLERK OF CIRCUIT COURT OR BOOK: 4613, PGS: 1153, PAGE: 1 OF 3

fNSTR # 2839153 Doc Type: AFF, Recorded: 8/10/2020 at 3:06 PM Rec. Fee: RECORDING \$27.00 | ERECORDED | Cashier By: NLANE

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, Ft 34224 2020-50283JLW



STATEMENT OF AUTHORITY

FIRST: The name of the limited liability company is: ANDERSUN RENTALS, LLC, a Florida limited liability Company

SECOND: The Florida Document Number of the limited liability company is: L13000004184

THIRD: The street address of the limited liability company's principal office is: 99 Nebsbit Street, Punta Gorda, FL 33950

The mailing address of the limited liability company's principal office is: 99 Nebsbit Street, Punta Gorda, FL 33950

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: KEVIN'S ANDERSON, as Manager and REGINA R. ANDERSON, as manager, each of whom may act unilaterally on behalf of and bind the company without the jointder of any other
 - ii No authority granted to:
- May enter into other transactions on behalf of the company, or otherwise act for or bind the company without the joiner of any other in all matters, including by way of example and not by way of limitation, the piedge 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.
 - Granted to: KEVIN S. ANDERSON, as Manager and REGINA R. ANDERSON, as manager, each of whom may act unitaterally on behalf of and bind the company without the joinder of any other
 - b. No authority granted to:

| Signature | REGINA R. ANDERSON, as Manager |
|---|---|
| Signature of authorized representative | Printed name and position title |
| STATE OF | |
| COUNTY OF | |
| ANDERSUN RENTALS, LLC, a Florida limite | wledged before me by means ofphysical presence or, 2020 by REGINA R ANDERSON, as Manager of ged liability Company, who is/are personally known to me of as identification and who did take an oath. |
| | Notary Public, State of My Commission Expires: (Seal) |
| | |
| | |
| | |
| | |
| The undersigned does hereby certify the accur | racy of the statements set forth herein |
| The undersigned does hereby certify the accur | |
| The undersigned does hereby certify the accuration of authorized representative | racy of the statements set forth herein KEVIN S. ANDERSON, as Manager Printed name and position title |
| Signature of authorized representative | KEVIN S. ANDERSON, as Manager |
| | KEVIN S. ANDERSON, as Manager |
| STATE OF N(W)(Y3C) COUNTY OF (UM)(IN) The foregoing instrument was acknown online notarization, this Diday of AHII) | KEVIN S. ANDERSON, as Manager |

| Fen Mu | DECINA D. ANDEDCON, on Manager |
|---|--|
| Signature of authorized representative | REGINA R. ANDERSON, as Manager Printed name and position title |
| STATE OF FL | |
| COUNTY OF Chalotte | |
| and an annual continuous anal | nowledged before me by means of physical presence of 2020 by REGINA R ANDERSON, as Manage nited liability Company, who is/are personally known to meas identification and who did take an oath Notary Edblic State of My Commission Expires: |
| المعارض والمعارض والمعارض ويعال ويعال ويعال والمعارض | (Seal) |
| Notary Public State of Florida Tiffany Pride My Commission GG (46478) | |
| Ay Commission Go (notice) Supres 09(2)(2022) | |
| The undersigned does hereby certify the acc | curacy of the statements set forth herein |
| The undersigned does hereby certify the acc | |
| \$ | |
| The undersigned does hereby certify the acc | |
| The undersigned does hereby certify the accompanies of authorized representative | |
| The undersigned does hereby certify the accompany of authorized representative STATE OF COUNTY OF The foregoing instrument was acknowline notarization, this day of ANDERSUN RENTALS, LLC, a Florida lim | |