

L14 000005373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

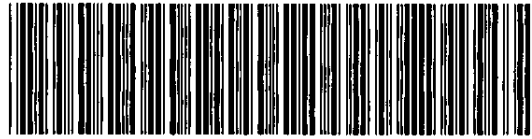
(Business Entity Name)

(Document Number)

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14 FEB 14 PM 12:27  
TALLAHASSEE, FLORIDA  
STATE  
SECRETARY OF STATE

J. Stivers FEB 05 2013

**JOHN R. COUNCIL**

ATTORNEY AT LAW

37739 ROBINSON AVE. • DADE CITY, FLORIDA 33523  
P.O. BOX 991 • DADE CITY, FLORIDA 33526-0991  
A. DALLAS ALBRITTON  
(OF COUNSEL)

TELEPHONE:  
(352) 567-5175  
January 14, 2014

FAX NO.:  
(352) 567-6719

Division of Corporations  
P.O. Box 6198  
Tallahassee, FL 32314

Re: Statement of Authority  
Agner Company, LLC

Dear Sir,

Please find for filing the Statement of Authority as included and payment of \$43.75 for filing fee and a certified copy. Please forward the certified copy in care of this office.

Very truly yours,

For John R. Council

JRC/meb

Encl:

LLC STATEMENT OF AUTHORITY

NAME: AGNER COMPANY, LLC

ADDRESS: 14132 18<sup>TH</sup> COURT  
DADE CITY, FL 33525

In accordance with F.S. 605.0302, and pursuant to the directive of the members hereof Agner Company, LLC does hereby designate:

WILLIAM M. AGNER

As the person(s) authorized as follows:

- 1.) Execute an instrument transferring real property held in the name of the company.
- 2.) Enter into other transactions on behalf, or otherwise act for or bind the company.

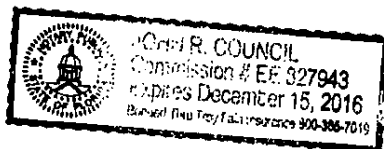
Witness my hand and seal this 6<sup>th</sup> day of Jan, 2014.

William M. Agner  
William M. Agner

Daniel P. Agner  
Daniel P. Agner

STATE OF FLORIDA  
COUNTY OF PASCO

The foregoing instrument was acknowledged before me this Jan 6, 2014, by William M. Agner and Daniel P. Agner who is personally known to me or who has produced \_\_\_\_\_, as identification.



[Signature]  
NOTARY PUBLIC  
My commission expires: