

L14 000 112840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

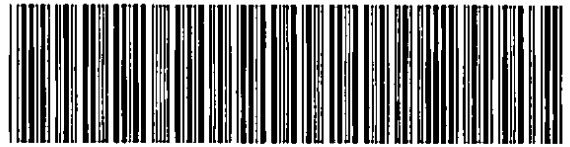
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100342769061

04/02/20--01003--003 \*\*25.00

FILED  
2020 APR -2 PM 3:36  
APR 15 2020

Stmt Auth

APR 15 2020

I ALBRITTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **WORLDSCO HOLDINGS 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:

**ABRAHAM ISAAC WERJUKA**  
*Name of Manager*

**WORLDSCO HOLDINGS LLC,**  
*Name of Company*

**234 Baytree Drive**  
*Address of Company*

**Rotonda West, FL 33947**  
*City/State and Zip Code*

**AVI@WORLDSCO.CO.UK**  
*E-Mail Address of Manager*

For further information concerning this matter, please call: (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  
WIDEIKIS, BENEDICT & BERTNSSON, LLC  
THE BIG W LAW FIRM  
3195 South Access Road  
Englewood, FL 34224

FILED  
2020 APR -2 PM 3:36  
NOTARIAL PUBLIC  
J. L. WIDEIKIS

## STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 17<sup>th</sup> day of MARCH, 2020, 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: **WORLDSCO HOLDINGS LLC, a Florida limited liability company.**

**SECOND:** The Florida Document Number of the limited liability company is: **L14000112840**

**THIRD:** The street address of the limited liability company's principal office is: **234 Baytree Drive, Rotonda West, FL 33947.**

The mailing address of the limited liability company's principal office is: **234 Baytree Drive, Rotonda West, FL 33947.**

**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 applications, permits and other related instruments necessary for the construction of homes in Charlotte and Sarasota counties, state of Florida including but not limited to any such documents required by the Building Construction Division in each such county.

- a. Granted to: **TOM BENNETT**, as Limited Manager.
- b. No authority granted to:

2. May enter into contracts for the purchase and sale of real property and improvements located thereon for the company, and sign any documents required to

convey such property, included but not limited to Warranty Deeds, Settlement Statements and addendums thereto, Seller's affidavits, Title affidavits, Terminations of Notice of Commencement, Final Contractor Affidavits and any other documents reasonably required to close any such transaction.

- a. Granted to: TOM BENNETT, as Limited Manager.
- b. No authority granted to:

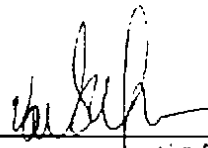
The undersigned does hereby certify the accuracy of the statements set forth herein.



\_\_\_\_\_  
Signature of authorized representative

ABRAHAM ISAAC WERJUKA, as Manager  
Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this 17<sup>th</sup> day of MARCH, 2020, by **ABRAHAM ISAAC WERJUKA, as Manager of** **WORLDSCO HOLDINGS LLC, a Florida limited liability company**, who is personally known to me, or who has provided \_\_\_\_\_, to establish his or her identity to me.



\_\_\_\_\_  
Print Name: Valerie T. Wagner  
Notary Public  
My commission expires:



VALERIE T WAGNER  
Commission # GG 151129  
Expires October 12, 2021  
Bonded Thru Budget Notary Services

[SEAL]