

L14 000 189 099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

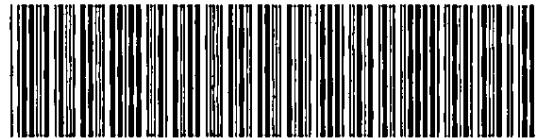
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900353404719

10/12/20--01010--002 **25.00

2020 OCT 12 PM 2:54
CLERK OF SUPERIOR COURT
CLERK OF SUPERIOR COURT

FILED

NOV 16 2020

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TCR CONNECTION 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:

TIM M. PRICE, JR.

Name of Manager

TCR CONNECTION LLC

Name of Company

27323 Whitman Ave. #B

Address of Company

Punta Gorda, FL 33983

City/State and Zip Code

TJMAR48K@GMAIL.COM

E-mail Address of Manager

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

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

2020 OCT 12 PM 2:54

FILED

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, FL 34224

FILED
2020 OCT 12 PM 2:54
CLERK OF DISTRICT COURT
NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 9 day of October, 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: **TCR CONNECTION LLC, a Florida Limited Liability Company**

SECOND: The Florida Document Number of the limited liability company is: **L14000189099**


THIRD: The street address of the limited liability company's principal office is: **27323 Whitman Ave. #B, Punta Gorda, FL 33983**

The mailing address of the limited liability company's principal office is: **27323 Whitman Ave. #B, Punta Gorda, FL 33983**

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: **TIM M. PRICE, JR.**, 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: **TIM M. PRICE, JR.**, as Manager.
 - b. No authority granted to:

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



Signature of authorized representative


TIM M. PRICE, JR., as Manager

Printed name and position title

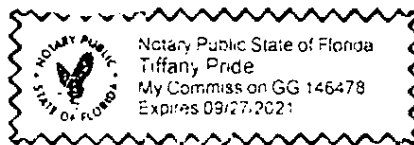
STATE OF FLORIDA

COUNTY OF CHARLOTTE

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 5 day of October, 2020 by TIM PRICE, JR., as Manager of TCR CONNECTION LLC, a Florida Limited Liability Company, who is/are personally known to me or who has/have produced FL Driver's Lic. as identification and who did take an oath.



Notary Public, State of
My Commission Expires:
(Seal)



2020 OCT 12 PM 2:54

FILED