

L15000143156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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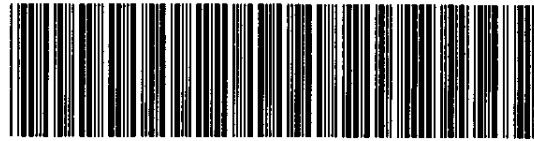
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 SEP 19 PM 3:00

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K. SALY
EXAMINER
SEP 21

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THE BIG W LAW FIRM
ATTORNEYS AT LAW

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1861 PLACIDA ROAD, SUITE 204
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PHONE: (941) 474-7713
TELEFAX (941) 474-8276
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Reply To: Port Charlotte

August 25, 2016

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: L15000143156 – 148 Lake Reedy, LLC

To Whom it May Concern;

Enclosed you will find our check number 1011758 in the amount of \$25.00 along with a Cover Letter and Statement of Authority for the above referenced matters.

Please let me know if you need anything further.

Sincerely,

Rebecca Koehler
Real Estate Assistant

Enclosures
20161128

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 148 LAKE REEDY, 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:

Roger A. Biederman
Name of Manager

148 Lake Reedy, LLC
Name of Company

204 Lake Reedy Blvd.
Address of Company

Frostproof, FL 33418
City/State and Zip Code

roger.biederman@yahoo.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

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

FILED
2016 SEP 19 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 22 day of August, 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: **148 LAKE REEDY, LLC**

SECOND: The Florida Document Number of the limited liability company is: **L15000143156**

THIRD: The street address of the limited liability company's principal office is: **204 Lake Reedy Blvd., Frostproof, FL 33843**

The mailing address of the limited liability company's principal office is: **204 Lake Reedy Blvd., Frostproof, FL 33843**

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: ROGER A. BIEDERMAN, 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

[REDACTED]

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: ROGER A. BIEDERMAN, as Manager.
b. No authority granted to:

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

Roger A. Biederman
Signature of authorized representative

ROGER A. BIEDERMAN, Member & Manager
Printed name and position title

The foregoing instrument was sworn to and acknowledged before me this 22
day of August, 2016, by ROGER A. BIEDERMAN, who is personally known
to me, or who has provided FDU, to establish his or her identity to me.



[Signature]
Print Name: _____
Notary Public
My commission expires: _____

[SEAL]

2016 SEP 19 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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