

L16000052343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

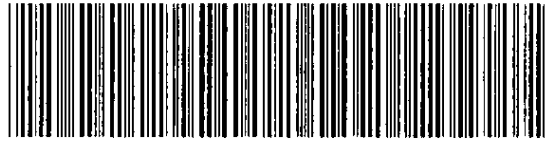
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300410693423

06/20/23--01040--001 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 JUN 20 PM 12:51

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRIEWEILER SD IRA 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:

GARY TRIEWELER

Name of Manager

TRIEWEILER SD IRA LLC

Name of Company

9572 Nastrand Circle

Address of Company

Port Charlotte, FL 33981

City/State and Zip Code

gtrieweler@gmail.com

E-mail Address of Manager

For further information concerning this matter, please call:

Breanna Cortez at bcortez@bigwlaw.com

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 and Return To:
WIDEIKIS, BENEDICT & BERNTSSON, LLC - THE BIG W LAW FIRM
John L. Wideikis, Esq.
3195 S. Access Road
Englewood, FL 34224

FILED

2023 JUN 20 PM 12: 51

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 5 day of JUNE, 2023, 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: **TRIEWEILER SD IRA LLC**

SECOND: The Florida Document Number of the limited liability company is: **L16000052343**

THIRD: The street address of the limited liability company's principal office is: **9572 Nastrand Circle, Port Charlotte, FL 33981**

The mailing address of the limited liability company's principal office is: **9572 Nastrand Circle, Port Charlotte, FL 33981**

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: **GARY TRIEWELER**, 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: **GARY TRIEWELER**, as Manager.
 - b. No authority granted to:

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

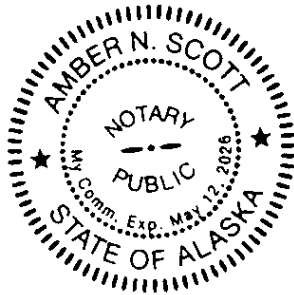
[Signature]
Signature of authorized representative

GARY TRIEWELER, as Manager
Printed name and position title

STATE OF Alaska
COUNTY OF Kenai Peninsula

The foregoing instrument was acknowledged before me by means of X physical presence or online notarization, this 5th day of June, 2023, by GARY TRIEWELER, as Manager of TRIEWELER SD IRA LLC, a Florida limited liability company who is personally known to me or who has produced Alaska Drivers Lic as identification and who did take an oath.

[Signature]
Notary Public, State of Alaska
My Commission Expires: May 12th, 2026
(Seal)



FILED
2023 JUN 20 PM 12:51
TALLAHASSEE, FLORIDA

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

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 9 day of JUNE, 2023, 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: **TRIEWEILER SD IRA LLC**

SECOND: The Florida Document Number of the limited liability company is: **L16000052343**

THIRD: The street address of the limited liability company's principal office is: **9572 Nastrand Circle, Port Charlotte, FL 33981**

The mailing address of the limited liability company's principal office is: **9572 Nastrand Circle, Port Charlotte, FL 33981**

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: **GARY TRIEWELER**, 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: **GARY TRIEWELER**, as Manager.
 - b. No authority granted to:

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

[Signature]
Signature of authorized representative

GARY TRIEWEILER, as Manager
Printed name and position title

STATE OF Alaska
COUNTY OF Kenai Peninsula

The foregoing instrument was acknowledged before me by means of X physical presence or ___ online notarization, this 5th day of June, 2023, by GARY TRIEWEILER, as Manager of TRIEWEILER SD IRA LLC, a Florida limited liability company who is personally known to me or who has produced Alaska Drivers Lic as identification and who did take an oath.

[Signature]
Notary Public, State of Alaska
My Commission Expires: May 12th, 2026
(Seal)

