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## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: 4670 ARLINGTON, 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:

	CRAIG CONNINGTON and CHRIS CONNINGTON
i	Name of Manager
	4670 ARLINGTON, LLC
	Name of Company
	4140 Three Lakes Court
	Address of Company
	Long Grove, IL 60047
-	City/State and Zip Code
	craig.connington@bmo.com /
	chris.connington@matholdingsinc.com
	E-mail Address of Manager

For further information concerning this matter, please call:

Peggy Lee at 941-964-1223

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center, Circle
Talianassee, 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 Robert C. Benedict, Esq. 333 Park Avenue, Unit 2A, PO Box 483 Boca Grande, FL 33921



## STATEMENT OF AUTHORITY

FIRST: The name of the limited liability company is: 4670 ARLINGTON, LLC

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

THIRD: The street address of the limited liability company's principal office is: 4140 Three Lakes

Court, Long Grove, IL 60047

The mailing address of the limited liability company's principal office is: 4140 Three Lakes Court, Long Grove, IL 60047

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: CRAIG CONNINGTON and CHRIS CONNINGTON, as Managers.
  - 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: CRAIG CONNINGTON and CHRIS CONNINGTON, as Managers.
  - b. No authority granted to:

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The undersigned does hereby certify the accuracy	y of the statements set forth herein.
	CRAIG CONNINGTON, as Manager
Signature of authorized representative	Printed name and position title
	CHRIS CONNINGTON, as Manager
Signature of authorized representative	Printed name and position title
STATE OF FLORIDA	
COUNTY OF CEC	
!	Industrial Designation from the C
2017, by CRAIG CONNINGTON, as Manager of	Iged before me this Arday of November 1966 (1967) Iged before me this Arday of November 1967 (1967) Iged by the second se
company, who are personally known to me or who	o have produced IL Drivers (items
identification and who did take an oath.	
	Ci. XXXII.
1	Notary Public, State of Florida  My Commission Expires:
	(Seal)
	<u>-</u>
STATE OF FLORIDA	œ.
COUNTY OF 1 CA	<b>.</b>
COUNTY OF LEC.	
The foregoing instrument was acknowled	lged before me this 27 day of November
2017. by CHRIS CONNINGTON, as Manager of	f 4670 ARLINGTON, LLC, a Florida limited liability
The foregoing instrument was acknowled 2017, by CHRIS CONNINGTON, as Manager of company, who are personally known to me or who identification and who did take an oath.	f 4670 ARLINGTON, LLC, a Florida limited liability
2017, by CHRIS CONNINGTON, as Manager of company, who are personally known to me or who	f 4670 ARLINGTON, LLC, a Florida limited liability
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