

From: William Lazenby
12/3/2018

Fax: 17273426131

To:

Fax: (850) 617-6383

Division of Corporations

Page: 1 of 2

12/03/2018 11:47 AM

L16000228989

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ELLISON LAZENBY PLLC
Account Number : 120150000059
Phone : (727)362-6151
Fax Number : (727)362-6131

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: admin@elattorneys.com

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CITY WIDE SELF-STORAGE, LLC

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STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: CITY WIDE SELF-STORAGE, LLC, a Florida
limited liability company

SECOND: The Florida Document Number of the limited liability company is: L16000228939

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

111 2ND AVENUE NE

SUITE 1250

ST. PETERSBURG, FL 33701

The mailing address of the limited liability company's principal office is:

SAME

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:

1. May execute an instrument transferring real property held in the name of the company:

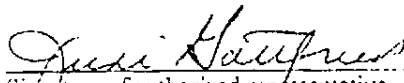
a. Granted to: Richard D. Wilkes

b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company:

a. Granted to: Richard D. Wilkes

b. No authority granted to: _____


Signature of authorized representative

Judi Gottfried as President of
TFG MANAGEMENT OF FLORIDA INC.
Typed or printed name of signature Its: Manager

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)