

L170000022107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2022 JUN 20 AM 11:25

Statement
of
Authority

RECEIVED
JUN 20 2022



EMMANUEL SHEPPARD & CONDON

ATTORNEYS AT LAW SINCE 1913

Sally B. Fox
Attorney at Law

30 S Spring Street
Pensacola, FL 32502
Sfox@esclaw.com | (850) 433-6581 | esclaw.com

July 18, 2022

VIA MAIL DELIVERY

Florida Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Re: Statement of Authority – TNW Construction, LLC
Our File: 16115-158266

To Whom It May Concern:

Enclosed is our Check#146922 in the amount of \$55.00 for the Statement of Authority being filed for TNW Construction, LLC. This represents the \$25.00 filing fee and \$30.00 for a certified copy to be mailed back to Emmanuel, Sheppard & Condon P.A. Stamped envelope is provided to have the certified copy mailed to us. p

Sincerely,

Alisa Kiker for
Sally B. Fox

/ajk
Enclosures

2022 JUL 20 PM 11:25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TNW CONSTRUCTION, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sally B. Fox

Name of Person

Emmanuel, Sheppard & Condon, P.A.

Firm/Company

30 S. Spring Street

Address

Pensacola, Florida 32502

City/State and Zip Code

weekley@tnwconstruction.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alisa Kiker

Name of Person

850

Area Code

444-3840

Daytime Telephone Number

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

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: TNW CONSTRUCTION, LLC

SECOND: The Florida Document Number of the limited liability company is: L17000022107

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

7366 Little Creek Way

Pace, FL 32571

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

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: Teri L. Weekley, Manager or
Michael Wayne Weekley, Authorized Member

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: Teri L. Weekley, Manager or
Michael Wayne Weekley, Authorized Member

b. No authority granted to: _____

Teri L. Weekley
Signature of authorized representative

Teri L. Weekley
Typed or printed name of signature

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

2022 JUN 20 AM 11:25