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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: PLACIDA INVESTMENTS LLC, A FLORIDA LIMITED LIABILITY COMPANY

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:

	AARON DIAZ			
	Name of Manager			
PLA	ACIDA INVESTMENTS LLC, A FLORIDA LIMITED LIABILITY COMPANY			
	Name of Company			
	105 FLOWER ROAD			
	Address of Company			
	Rotonda West, FL 33947			
	City/State and Zip Code			
	AARONDIAZ@GMAIL.COM			
	E-mail Address of Manager			

For further information concerning this matter, please call:

Jada Stiver at

STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Florida 32303 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 ROGER D. EATON, CHARLOTTE COUNTY CLERK OF CIRCUIT COURT OR BOOK: 4936, PGS: 1282, PAGE: 1 OF 2

INST_R # 3066100 Doc Type: AFF, Recorded: 3/1/2022 at 3:39 PM

Rec. Fee: RECORDING \$18.50 ERECORDED Cashier By: CRYSTALH

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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

SECRETARY OF STATE TALLAHASSEF, FI

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this // day of http://www.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: PLACIDA INVESTMENTS LLC, A FLORIDA LIMITED LIABILITY COMPANY

SECOND: The Florida Document Number of the limited liability company is: L18000127022

THIRD: The street address of the limited liability company's principal office is: 105 FLOWER ROAD, Rotonda West, FL 33947

The mailing address of the limited liability company's principal office is: 105 FLOWER ROAD, Rotonda West, FL 33947

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:

- 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: AARON DIAZ, 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: AARON DIAZ, as Manager.
 - b. No authority granted to:

The undersigned does hereby certify the accuracy /2	of the statements set forth herein.
Signature of authorized representative	AARON DIAZ, as Manager Printed name and position title
STATE OF FLORIDA	
COUNTY OF Charlo #	
notarization, this // day of // HOWAS INVESTMENTS LLC, A FLORIDA LIMITED LIABI	re me by means of Xphysical presence or online 7, 20,27 by AARON DIAZ, as Manager of PLACIDA LITY COMPANY who is personally known to me or who eation and who did take an oath.
	Notan Public, State of
JADA STIVER Commission # HH 145762 Expires June 27, 2025 Bonded Trzu Troy Fain Insurance 800-385-7019	My Commission Expires: (Seal)