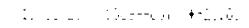


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Office Use Only







COVER LETTER

TO:	Registration Section	
	Division of Corporations	

SUBJECT: JOHNSON LAWNSCAPES 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:

TRAVIS D. JOHNSON
Name of Manager
JOHNSON LAWNSCAPES LLC
Name of Company
164 Jennifer Drive
Address of Company
Rotonda West, FL 33947
City/State and Zip Code
capehazeconstruction@gmail.com
E-mail Address of Manager

For further information concerning this matter, please call:941-627-1000

Tiffany Pride at Ext:2016

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 ŁAW FIRM John L. Wideikis, Esq. 3195 S. Access Road Englewood, FL 34224 2023-50920JLW

STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 30 day of October, 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: JOHNSON LAWNSCAPES LLC

SECOND: The Florida Document Number of the limited liability company is: L18000142333

THIRD: The street address of the limited liability company's principal office is: 164 Jennifer Drive, Rotonda West, FL 33947

The mailing address of the limited liability company's principal office is: 164 Jennifer Drive, 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:

- 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: TRAVIS D. JOHNSON, 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.

2023 KOY

- a. Granted to: TRAVIS D. JOHNSON, as Manager.
- b. No authority granted to:

	TRAVIS D. JOHNSON, as Manager
Signature of authorized representative	Printed name and position title
STATE OF <u>FC</u> ,	
COUNTY OF Chalothe	
online notarization, this 7.5 day of α .	nowledged before me by means ofphysical preser, 2023 by TRAVIS D. JOHNSON, as Manag
IOHNSON LAWNSCAPES LLC, who is/ar	re personally known to me or who has/have produced
FC D7. (:C as identification	on and who did take an oath?
	THE R
	Notary Public. State of
	My Commission Expires: (Seal)
	(Sear)

1/

ROGER D. EATON, CHARLOTTE COUNTY CLERK OF CIRCUIT COURT, PAGE: 1 OF 2 INSTR #: 3332144 Doc Type: AFF, Recorded: 10/30/2023 at 04:32 PM

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This instrument Prepared By and Return To: WIDEIKIS, BENEDICT & BERNTSSON, LLC - THE BIG W LAW FIRM John L. Widelkis, Esq. 3195 S. Access Road Englewood, FL 34224 2023-50920JLW

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 - a. Granted to: TRAVIS D. JOHNSON, as Manager.
 - b. No authority granted to:

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

Signature of authorized representative

TRAVIS D. JOHNSON, as Manager

Printed name and position title

STATE OF

COUNTY OF Charlotle

The foregoing instrument was acknowledged before me by means of __physical presence or __ online notarization, this _____ day of _______, 2023 by TRAVIS D. JOHNSON, as Manager of, JOHNSON LAWNSCAPES LLC, who is/are personally known to me or who has/have produced ______ as identification and who did take an oatly?

Notary Jublic. State of My Commission Expires: (Seal)

(OCai)

TIFFANY PRIOE
Commission: # HH 175712
Explos September 27, 2025
Bonded Thru Troy Fain Instrument 800-385-7019