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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

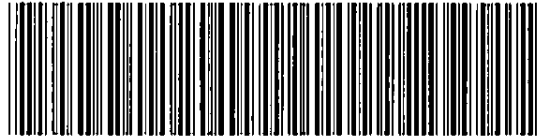
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: 9905 HAZE DRIVE, 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:

MICHAEL DEMARCO & MARIA DEMARCO

*Name of Manager*

9905 HAZE DRIVE, LLC

*Name of Company*

124 COUGAR WAY

*Address of Company*

Rotonda West, FL 33947

*City/State and Zip Code*

Mike@sellingsuncoast.com

*E-mail Address of Manager*

For further information concerning this matter, please call:

Anne Borovsky at

**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 LAW FIRM  
John L. Wideikis, Esq.  
3195 S. Access Road  
Englewood, FL 31224

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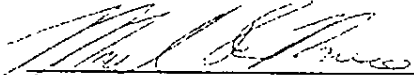
### STATEMENT OF AUTHORITY

Pursuant to 605.0302, Florida Statutes, this limited liability company submits the following statement of authority on this 13 day of March, 2024, 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:

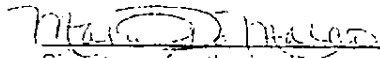
- FIRST: The name of the limited liability company is: 9905 HAZE DRIVE, LLC
- SECOND: The Florida Document Number of the limited liability company is: L19000240053
- THIRD: The street address of the limited liability company's principal office is: 124 COUGAR WAY, Rotonda West, FL 33947
- The mailing address of the limited liability company's principal office is: 124 COUGAR WAY, 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: MICHAEL DEMARCO, as Manager, and MARIA DEMARCO, as Manager, either of whom may unilaterally bind the company without the joinder of the other.
  - 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: MICHAEL DEMARCO, as Manager, and MARIA DEMARCO, as Manager, either of whom may unilaterally bind the company without the joinder of the other.
  - b. No authority granted to:

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

  
Signature of authorized representative

MICHAEL DEMARCO, as Manager  
Printed name and position title

  
Signature of authorized representative

MARIA DEMARCO, as Manager  
Printed name and position title

STATE OF FL  
COUNTY OF Charlotte

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this 19 day of March, 2024 by MICHAEL DEMARCO and MARIA DEMARCO, as Managers of 9905 HAZE DRIVE, LLC, a Florida limited liability company, who is/are personally known to me or v/h who has/have produced id as identification and who did take an oath.

  
Notary Public, State of \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_  
(Seal)

