

L20000058625

(Requestor's Name)

(Address)

(Address)

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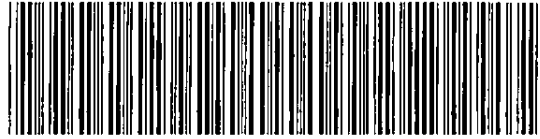
(Business Entity Name)

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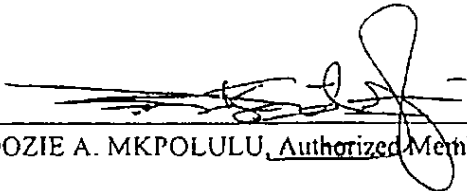


STATEMENT OF AUTHORITY

I, CHIEDOZIE A. MKPOLULU, sole Authorized Member for EDOZIE MKL LIMITED LIABILITY COMPANY (hereinafter "Company"), with the principal and mailing address of 9729 Lost Creek Drive, Winter Garden, FL 34787 states the authority granted for the following person and position:

1. CHIEDOZIE A. MKPOLULU, sole Authorized Member of the Company, has the sole and absolute authority to:
  - a. Execute an instrument transferring real property held in the name of the Company; and
  - b. Enter into other transactions on behalf of, or otherwise act for or bind, the Company.

This Statement of Authority was signed on the 18 day of May, 2023.

  
\_\_\_\_\_  
CHIEDOZIE A. MKPOLULU, Authorized Member

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This Statement of Authority prepared by:  
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Orlando, FL 32803  
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