

L9900002430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

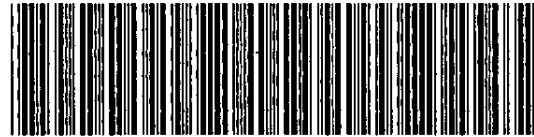
☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:



800297360168

04/03/17--01014--001 \*\*25.00

FILED

2017 APR -3 P 1:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Office Use Only

D. BRUCE  
APR 04 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Foot & Ankle Real Estate, L.L.C.  
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:

Jay A. Brett

Name of Person

Sheppard, Brett, Stewart, Hersch, Kinsey & Hill, P.A.

Firm/Company

9100 College Pointe Court

Address

Fort Myers, Florida 33919

City/State and Zip Code

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

For further information concerning this matter, please call:

Jay A. Brett

239

334-1141

at ( )

Name of Person

Area Code

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

2017 APR -3 P 1:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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: Foot & Ankle Real Estate, L.L.C.

**SECOND:** The Florida Document Number of the limited liability company is: 9900002430

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

5238 Mason Corbin Court, #102

Fort Myers, Florida 33907

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

5238 Mason Corbin Court, #102

Fort Myers, Florida 33907

**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:

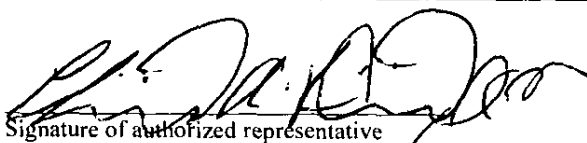
a. Granted to: Christopher A. Klimowich, D.P.M.

b. No authority granted to: N/A

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Christopher A. Klimowich, D.P.M.

b. No authority granted to: N/A

  
Signature of authorized representative

Christopher A. Klimowich

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 APR -3 P 1:51

FILED