Sanibel Captiva COMMUNITY BANK
2475 Library Way
Sanibel, FL 33957

ADDRESS SERVICE REQUESTED

8790 LAREDO LLC
1841 ORTIZ AVE
FORT MYERS FL 33905-4908

Statement Ending 09/30/2020

8790 LAREDO LLC

Account Number: XXXX8115

Managing Your Accounts

Branch Name	Downtown Office
Phone Number	(239) 274-6205
Mailing Address	1533 Hendry St. Suite 100 Fort Myers, FL 33901
Website	www.sancapbank.com

Let's get social! We're ready to connect with you on Facebook, Twitter and LinkedIn.

Summary of Accounts

As a nonconventional bank, our foundation is built on people and relationships. We empower and support our neighbors, team and community through local decision-making. Thank you for choosing Sanibel Captiva Community Bank to be your banking partner.

Account Type	Account Number	Ending Balance
BUSINESS CHECKING	XXXX8115	$43,490.76

BUSINESS CHECKING-XXXX8115

Account Summary

Date	Description	Amount
09/01/2020	**Beginning Balance**	**$38,489.60**
	6 Credit(s) This Period	$33,069.67
	7 Debit(s) This Period	$28,068.51
09/30/2020	**Ending Balance**	**$43,490.76**

Other Credits

Date	Description	Amount
09/03/2020	TRANSFER TO 8790 LAREDO LLC FROM * * * * 1791 TARGET ROOFING	$1,500.00
09/10/2020	TRANSFER TO 8790 LAREDO LLC FROM * * * * 1791 TARGET ROOFING	$1,500.00
09/17/2020	TRANSFER TO 8790 LAREDO LLC FROM * * * * 1791 TARGET ROOFING	$1,500.00
09/24/2020	TRANSFER TO 8790 LAREDO LLC FROM * * * * 1791 TARGET ROOFING	$1,500.00
09/28/2020	SEP 20 PYMNT P1728.22 I 3340.45	$5,069.67
09/28/2020	Monthly Rent Pymnt	$22,000.00

Other Debits

Date	Description	Amount
09/04/2020	TRANSFER TO CASEY CROWTHER FROM * * * * 8115 8790 LAREDO LLC	$1,500.00
09/11/2020	TRANSFER TO CASEY CROWTHER FROM * * * * 8115 8790 LAREDO LLC	$1,500.00
09/18/2020	TRANSFER TO CASEY CROWTHER FROM * * * * 8115 8790 LAREDO LLC	$1,500.00
09/25/2020	TRANSFER TO CASEY CROWTHER FROM * * * * 8115 8790 LAREDO LLC	$1,500.00
09/28/2020	PAYMENT TO COMML REAL ESTATE LOAN 52914530	$14,550.60

BUSINESS CHECKING-XXXX8115 (continued)

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount
1015	09/16/2020	$3,767.87	1016	09/24/2020	$3,750.04

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
09/03/2020	$39,989.60	09/16/2020	$34,721.73	09/25/2020	$30,971.69
09/04/2020	$38,489.60	09/17/2020	$36,221.73	09/28/2020	$43,490.76
09/10/2020	$39,989.60	09/18/2020	$34,721.73		
09/11/2020	$38,489.60	09/24/2020	$32,471.69		

Overdraft and Returned Item Fees

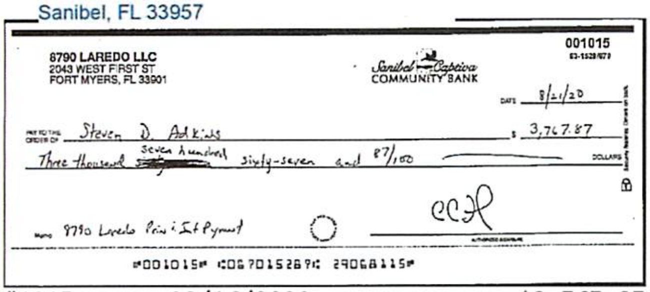
	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

Sanibel Captiva
COMMUNITY BANK
2475 Library Way
Sanibel, FL 33957

Statement Ending 09/30/2020

8790 LAREDO LLC

Account Number: XXXX8115



8790 LAREDO LLC
2043 WEST FIRST ST
FORT MYERS, FL 33901

Sanibel Captiva COMMUNITY BANK

001015
63-1528/670

DATE 8/21/20

PAY TO THE ORDER OF Steven D. Adkins $ 3,767.87

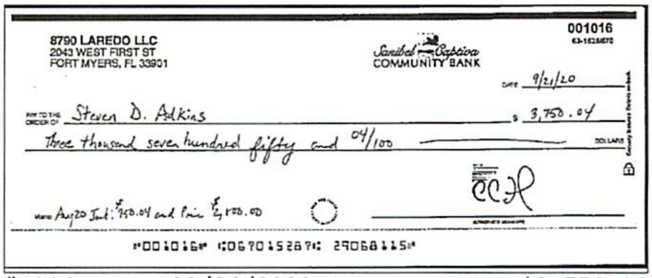
Three thousand ~~sixty~~ seven hundred sixty-seven and 87/100 DOLLARS

MEMO 8790 Laredo Prin & Int Pyment

AUTHORIZED SIGNATURE

⑈001015⑈ ⑆067015287⑆ 29068115⑈

#1015 09/16/2020 $3,767.87



8790 LAREDO LLC
2043 WEST FIRST ST
FORT MYERS, FL 33901

Sanibel Captiva COMMUNITY BANK

001016
63-1528/670

DATE 9/21/20

PAY TO THE ORDER OF Steven D. Adkins $ 3,750.04

Three thousand seven hundred fifty and 04/100 DOLLARS

MEMO Aug20 Int: $750.04 and Prin $3,000.00

AUTHORIZED SIGNATURE

⑈001016⑈ ⑆067015287⑆ 29068115⑈

#1016 09/24/2020 $3,750.04

THIS PAGE LEFT INTENTIONALLY BLANK

THIS FORM IS PROVIDED TO HELP YOU BALANCE YOUR STATEMENT

WITHDRAWALS OUTSTANDING - NOT CHARGED TO ACCOUNT

No.	$	
TOTAL	$	

BEFORE YOU START-

PLEASE BE SURE YOU HAVE ENTERED IN YOUR REGISTER ALL AUTOMATIC TRANSACTIONS SHOWN ON THE FRONT OF YOUR STATEMENT.

YOU SHOULD HAVE ADDED IF ANY OCCURRED:

1. Loan advances.
2. Credit memos.
3. Other automatic deposits.

YOU SHOULD HAVE SUBTRACTED IF ANY OCCURRED:

1. Automatic loan payments.
2. Automatic savings transfers.
3. Service charges.
4. Debit memos.
5. Other automatic deductions and payments.

BALANCE SHOWN ON THIS STATEMENT $ ________

ADD

DEPOSITS NOT SHOWN ON THIS STATEMENT *(IF ANY)* $ ________

____

____

TOTAL $ ________

SUBTRACT –

WITHDRAWALS OUTSTANDING $ ________

BALANCE $ ________

SHOULD AGREE WITH YOUR REGISTER BALANCE AFTER DEDUCTING SERVICE CHARGE (IF ANY) SHOWN ON THIS STATEMENT.

Please examine immediately and report if incorrect. If no reply is received within 60 days the account will be considered correct.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

In case of errors or questions about your electronic transfers telephone us at the phone number listed on the front, or write us at the address listed on the front as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error appeared.

(1) Tell us your name and account number (if any).
(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
(3) Tell us the dollar amount of the suspected error.
If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

For errors involving new accounts, point-of-sale, or foreign initiated transactions, we may take up to 90 days to investigate your complaint or question. For new accounts, we may take up to 20 business days to credit your account for the amount you think is in error.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

YOUR LINE OF CREDIT ACCOUNTS SUMMARY OF RIGHTS IS OUTLINED BELOW.

This is a summary of your rights: a full statement of your rights and our responsibilities under the Federal Fair Credit Billing Act will be sent to you both upon request and in response to a billing error notice.

The following information applies only to loans made to you under your Loan Account line of credit.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR LINE OF CREDIT ACCOUNTS

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at the address located on the front of this bill as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

(1) Your name and account number.
(2) The dollar amount of the suspected error.
(3) Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any money in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

We figure a portion of the Finance Charge on your account by applying the appropriate "Daily Periodic rate" to the appropriate portions of the "Principal" balances. We take the beginning "Principal" balance of your account each day, add any new (purchases, advances, loans) and subtract the "principal" portion of the payments or credits. This gives us the new "principal". We then apply the applicable daily periodic rate to the "principal" times the number of "days" at the new "Principal". This gives us the "Accrued Finance Charge" for each period of days in the billing cycle. To arrive at the "Finance Charge" for the billing cycle, we add all of the "Accrued Finance Charge"(s) together for the billing cycle.

The minimum periodic payment required is shown on the front of this bill. You may pay off your Credit Line Account loan balance at any time, or make voluntary additional payments. Payments shall be applied, first to any unpaid **FINANCE CHARGES**, and second the principal loan balance outstanding in your Credit Line Account. Periodic statements may be sent to you at the end of each billing cycle showing your Credit Line Account loan transactions.

Send payments and inquiries to address shown on front of bill.

NOTE: Payments received after close of business shall be deemed received on the following business day for purposes of crediting your account.

Check 21 Notification

If you request the return of your original checks you may receive a "Substitute Check" in response. The Substitute Check is the legal equivalent of an original check and you have rights that apply when you believe, in good faith, that a Substitute Check was not properly charged to your account. Contact your branch or call the number on the front of this statement to request a Check 21 disclosure.

THIS PAGE LEFT INTENTIONALLY BLANK