

LD9000087455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

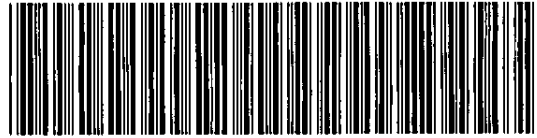
(Business Entity Name)

(Document Number)

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

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2016 OCT 17 P 2:27

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D. BRUCE  
OCT 18 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PCP GROUP, LLC  
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:

JOHN S. HASKELL

Name of Person

PCP GROUP, LLC

Firm/Company

4801 ULMERTON ROAD

Address

CLEARWATER, FL 33762-4148

City/State and Zip Code

john.haskell@pellonusa.com

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

For further information concerning this matter, please call:

JOHN S. HASKELL, MANAGER at 203 981-8800  
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

CR2E138 (2/14)

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TALLAHASSEE, FLORIDA

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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: PCP GROUP, LLC

SECOND: The Florida Document Number of the limited liability company is: L09000087455

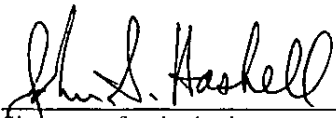
THIRD: The street address of the limited liability company's principal office is:  
4801 ULMERTON ROAD  
CLEARWATER, FL 33762-4148

The mailing address of the limited liability company's principal office is:  
4801 ULMERTON ROAD  
CLEARWATER, FL 33762-4148

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: JOHN S. HASKELL; HERBERT B. DERMAN
  - b. No authority granted to: CRISTOPHER HASKELL; NICOLAS HASKELL
- 2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
  - a. Granted to: JOHN S. HASKELL; HERBERT B. DERMAN; MIRJANA TASEVSKA
  - b. No authority granted to: CRISTOPHER HASKELL; NICOLAS HASKELL

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CLERK OF COUNTY OF FLORIDA

  
Signature of authorized representative

JOHN S. HASKELL  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)