

L20 000 343 199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

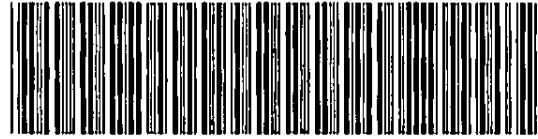
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 24 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SYDNEY DOVER FARMS, 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:

*EFF.
2-5-2021*

BRIAN ROSE
Name of Person

SYDNEY DOVER FARMS, LLC
Firm/Company

111 S. ARMENIA AVE., SUITE 201
Address

TAMPA, FL 33609
City/State and Zip Code

BROSE@EISENHOWERPROPERTYGROUP.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN ROSE at (813) 610.3043
Name of Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: SYDNEY DOVER FARMS, LLC

SECOND: The Florida Document Number of the limited liability company is: L20000343199

THIRD: The street address of the limited liability company's principal office is:
111 S. ARMENIA AVE.
SUITE 201
TAMPA, FL 33609

The mailing address of the limited liability company's principal office is:
111 S. ARMENIA AVE.
SUITE 201
TAMPA, FL 33609

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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.

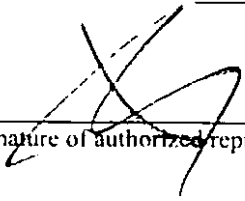
a. Granted to: NICHOLAS DISTER

b. No authority granted to: _____

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

a. Granted to: NICHOLAS DISTER

b. No authority granted to: _____



Signature of authorized representative

JEFFERY S. HILLS

Typed or printed name of signature

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