## 40500034043

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## COVER LETTER

Division of Corporations		
Kerry Construction, LLC SUBJECT:		
Terror :	f Limited Liability Comp	pany
Dear Sir or Madam:		
The enclosed Statement of Authority and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
C. Brandon Belger		
Name of Person		
Koontz Mlynarczyk, LLC		
Firm/Company		
1058 East Montague Avenue		
Address		
North Charleston, South Carolina 29	9405	
City/State and Zip Code	· · · · ·	
brandon@kmlawsc.com		
E-mail address: (to be used for future a	annual report notification	1)
For further information concerning this matter.	please call;	
C. Brandon Belger	843	225-4252
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registrati	G ADDRESS: ion Section of Corporations 6327

Tallahassee, Florida 32314

2661 Executive Center Circle

Tallahassee, Florida 32301

TO:

Registration Section

## STATEMENT OF AUTHORITY

authority		g stateme	ent of
FIRST:	The name of the limited liability company is: Kerry Construction, LLC		
SECON	D: The Florida Document Number of the limited liability company is: L05000034043		
	The street address of the limited liability company's principal office is:  1589 Drury Court, Saint Augustine, Florida 32092		
	The mailing address of the limited liability company's principal office is: 1589 Drury Court, Saint Augustine, Florida 32092		
position o person o	H: This statement of authority grants or sets limitations of authority on all persons having to fa person in a company, whether as a member, transferee, manager, officer or otherwise on the following:  1. May execute an instrument transferring real property held in the name of the company.	to a spec	cific 
	a. Granted to: Lauren Cleary	SECRE ON	
	b. No authority granted to:	VSZELTELO VSZELTELO	26 密節
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the compara.  a. Granted to: Lauren Cleary		cr Cr
	b. No authority granted to:		
	Kerry Clark Williams		
Signature	e of authorized representative  Filing Fee: \$25.00	ignature	_

Certified Copy: \$30.00 (optional)

CR2E138 (2/14)