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SECRETARY OF STATE
SECRETARY OF STATE
AND ANASSEE, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations BOLCOR COMMERCIAL FLOORING, 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: Mark R. Komray Esq. Name of Person Attorney at Law Firm/Company 1882 N. Tamiami Trail, #3434 Address Fort Myers, FL 33918 City/State and Zip Code mrk@komraylaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mark R. Komray, Esq. 239 244-2245

STREET/COURIER ADDRESS:

Name of Person

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Daytime Telephone Numb

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

STATEMENT OF AUTHORITY

authority		•	nent of	
FIRST:	The name of the limited liability company is: Bolcor Commercial Flooring, LLC	<u> </u>		_
SECON	D: The Florida Document Number of the limited liability company is: L07000005768	3		_
	The street address of the limited liability company's principal office is: 4651 S.E. 11th Place			
	Cape Coral, FL 33904			
	The mailing address of the limited liability company's principal office is: 4720 S.E. 15th Ave.			
	Suite #203			
	Cape Coral, FL 33904			
position	 H: This statement of authority grants or sets limitations of authority on all persons having of a 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 a. Granted to: John P. Christensen 	or to a spe	16 SEP 14	
	b. No authority granted to: Kristopher R. Bollinger	OF STATE	₩ 8: 53	
	2. May enter into other transactions on behalf of, or otherwise act for or bind, the compa a. Granted to: John P. Christensen	any.		
,	b. No authority granted to: Kristopher R. Bollinger			
M(John Christensen			
Signatur	re of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	`signature	;	

CR2E138 (2/14)