

LC7000031938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

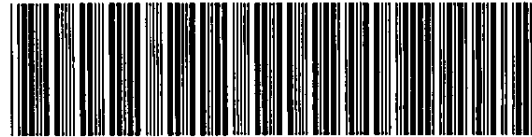
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600306306486

12/08/17--01013--034 **25.00

FILED

2017 DEC - 8 PM 3:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
DEC 11 2017

KIRK • PINKERTON, P.A.

ATTORNEYS AT LAW

ROBERT J. CARR
L. NORMAN VAUGHAN-BIRCH ***
TIMOTHY S. SHAW *
WILLIAM E. ROBERTSON, JR.
THOMAS D. SHULTS **
BRADLEY W. HOGREVE *
F. GANT McCLOUD *□△

F. STEVEN HERB
GARY W. PEAL
ROBERT K. ROBINSON △△○
ANASTASIA M. STEFANOUE *
JEFFREY M. GUY
ELISHA M. ROBERTSON
JODI M. RUBERG

* BOARD CERTIFIED IN WILLS, TRUSTS
AND ESTATES
△△ BOARD CERTIFIED BUSINESS LITIGATION LAW
(1996-2017)
* BOARD CERTIFIED REAL ESTATE LAW LAWYER
** BOARD CERTIFIED CIVIL TRIAL ATTORNEY
△△ BOARD CERTIFIED IN CITY, COUNTY & LOCAL
GOVERNMENT LAW
* CERTIFIED CIRCUIT COURT MEDIATOR
■ ALSO ADMITTED IN NEW YORK
□ ALSO ADMITTED IN ILLINOIS
△ ALSO ADMITTED IN PENNSYLVANIA
○ ALSO ADMITTED IN GEORGIA

December 5, 2017

Direct Dial: (941) 364-2436

Fax: (941) 364-2490

E-mail: kzampella@kirkpinkerton.com

Department of State
LLC Division
P.O. Box 6327
Tallahassee, FL 32314

Re: Suncoast Professional Services, LLC
#L07000031938

Dear Sir/Madam:

Enclosed you will find a Statement of Authority to be filed with the Department of State. I have also enclosed a check in the amount of \$25.00 to cover the filing fee. Please return a filed copy to our office.

If you have any questions, please do not hesitate to contact me.

Sincerely,



Kathy Zampella
Legal Assistant

/klz
Enclosures

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: Suncoast Professional Services, LLC

SECOND: The Florida Document Number of the limited liability company is: L07000031938

THIRD: The street address of the limited liability company's principal office is:

7840 Fruitville Road

Sarasota, FL 34240

The mailing address of the limited liability company's principal office is:

7840 Fruitville Road

Sarasota, FL 34240

FILED
2011 DEC - 8 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

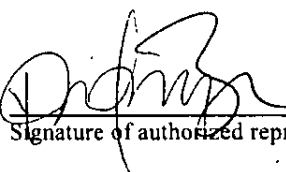
a. Granted to: Mark Bower

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: Mark Bower

b. No authority granted to: _____


Signature of authorized representative

Mark Bower

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

