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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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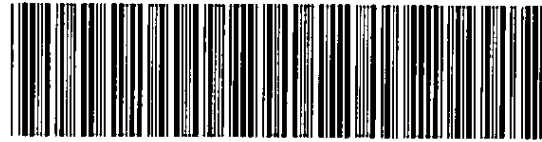
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

Statement
of
Authority

APR 21 2021

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bankers Credit Group, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fact(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Darren Covar
Name of Person

Covar Law Group, PA
Firm/Company

614 E. HWY 50, SUITE 356
Address

CLERMONT, FL 34711
City/State and Zip Code

Darren@Covarlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darren Covar, ESQ at: (508) 638-1700
Name of Person Daytime Phone 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

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SECRETARY OF STATE
TALLAHASSEE, FL

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(I), Florida Statutes, this limited liability company submits the following statement or authority:

FIRST: The name of the limited liability company is: Bankers Credit Group, LLC

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

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

Address: 614 E. HWY 50,
SUITE # 356
CLERMONT, FL 34711

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

Address: 614 E. HWY 50,
SUITE # 356
CLERMONT, FL 34711

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: Yicxy Pringle

b. NO authority granted to:


**BRITTANY SPRAGUE aka BRITTANY SPRAGUE BENEVIDES or
ASSIGNEES or COUNSEL ON BEHALF OF BRITTANY SPRAGUE**

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

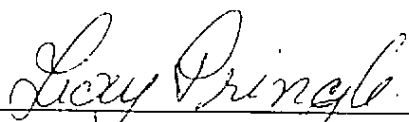
a. Granted to: Yicxy Pringle

b. NO authority granted to:

**BRITTANY SPRAGUE aka BRITTANY SPRAGUE BENEVIDES or
ASSIGNEES or COUNSEL ON BEHALF OF BRITTANY SPRAGUE**



Signature of authorized Representative



Typed or printed name of Signature

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