

LO9000095769

(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



700271802757

04/17/15--01016--014 **25.00

FILED

2015 APR 17 PM 6:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 28 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CPR Contracting 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:

Jason Bousquet

Name of Person

CPR Contracting LLC

Firm/Company

11468 New Berlin Road

Address

Jacksonville, Florida 32226

City/State and Zip Code

jason@cprcontracting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Bousquet

Name of Person

at (904) 723-3500

Area Code

Daytime Telephone 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

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: CPR Contracting LLC

SECOND: The Florida Document Number of the limited liability company is: L09000095769

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

11468 New Berlin Road

Jacksonville, Florida. 32226

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

11468 New Berlin Road

Jacksonville, Florida 32226

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.

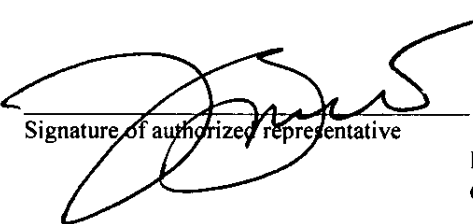
a. Granted to: _____

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: Glen Ballard

b. No authority granted to: _____


Signature of authorized representative

Jason Bousquet

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 APR 17 PM 6:00

FILED