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(Re	equestor's Name)	
(Ad	dress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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Office Use Only



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SEP 2 2 2015 **J SHIVERS**

To whom It May Concern

I hope this teller finds the bearer in good Spinds. I enclose a teller of deelhoute today. Thank you for all your kind advice to service. Every time I call I am amazed at how you all are so known.

Valence Detallo

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BYP ENVIRON MENTAL SOLETIONS 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:
Name of Person
RIP ENUICONMENTAL Solutions LLC Firm/Company
411 N. Briggs ave Sw#422
Sarasota FL. 34237 City/State and Zip Code
Zelda 5190 @ acl. Com. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dalem R Dell Hitchmon at (5/6) 444-0844- Name of Person Campi. Area Code Daytime Telephone Number
Name of Person 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

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STATEMENT OF AUTHORITY

Pursuant authority	to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of
FIRST:	The name of the limited liability company is: BUP ENVIRONMENTAL Sollitions
SECONI	D: The Florida Document Number of the limited liability company is: L1500033811
THIRD:	The street address of the limited liability company's principal office is: 411 N. Briggs ave Jan 122 Savaso La FL 3423)
	The mailing address of the limited liability company's principal office is: 411 N. Buggs Que. 5 w 422 Sarasata Fl. 34237
position of person or	H: This statement of authority grants or sets limitations of authority on all persons having the status or of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific in the following: 1. May execute an instrument transferring real property held in the name of the company. 2. Alene R. DeLell Rock Mar
	b. No authority granted to: Paul A Posch main of Paul Paul A Posch main of the Paul Paul A Posch main of the Paul Paul A Posch main of the Paul A
:	2. May enter into other transactions on behalf of, or otherwise act for or bind, the company. a. Granted to: Delelly lose honorm (ex. Mgr) Ehzaball Lavellee b. No authority granted to: Peek Lc L C. Offi Provided to the company.
Jula Signature	Toped or printed name of signature EX. MGI. Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)