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(Ad	ldress)	
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ALLAHASSEF FIRE

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COVER LETTER

	Registration Section Division of Corporations	1 · * * * *	
SUBJEC'	Halo Metal Finishing, LLC		
SOBJEC		mited Liability Comp	pany
Dear Sir o	or Madam:		
The enclo	sed Statement of Authority and fee(s) are	submitted for filing.	
Please ret	urn all correspondence concerning this ma	tter to the following:	
Michae	el Scott, Esq.		
	Name of Person		
The Do	orcey Law Firm, PLC		
	Firm/Company		
10181	Six Mile Cypress Pkwy, Suite C		
	Address	····	
Fort My	ers, FL 33966		
	City/State and Zip Code		
mike@	dorceylaw.com		
	E-mail address: (to be used for future annu	al report notification)
For furthe	r information concerning this matter, pleas	se call:	
Michae	Scott	239 at (418-0169
·	Name of Person	Area Code	Daytime Telephone Number
F	STREET/COURIER ADDRESS: Registration Section Division of Corporations	Registrati	G ADDRESS: on Section of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E138 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

	wing statement of authority.	
NAN	ME OF LLC: HALO METAL FINISHING, LLC	
THE	E FLORIDA LLC DOCUMENT NUMBER:	
PRI	NCIPAL OFFICE ADDRESS: 13351 SADDLE ROAD, SUITE 20 FORT MYERS, FL 33913	05
MAI	ILING ADDRESS: 13351 SADDLE ROAD, SUITE 205 FORT MYERS, FL 33913	
autho Auth	ow is the authority given to each Member of the LLC. If a Member has orization, the option "All Authorization Options Listed Below Apply nority)" will be selected. A separate sheet of paper will be attached if a specific authority to an option not listed in this form.	to Him/Her (Unlimited
	MEMBERS:	5 OCT CRETA
Mer	mber #1	7
NAN	ME: RYAN BRINGARDNER	-9 AH ARY OF
ADD	ORESS: 13351 SADDLE ROAD, SUITE 205	S
	FORT MYERS, FL 33913	8:20 SIAIE LORIDA
A	All Authorization to act on behalf of the LLC, including but n	ot limited to Options
	ed Below (Unlimited Authority).	
	He/She has Authority to Execute an Instrument Conveying (S	Sale/Lease) Real
	perty Owned by the LLC.	
	He/She has Authority to Purchase Property in the Name of th	e LLC.
	He/She has authority to Enter into Contract(s) for the Mainte	enance/ Improvement
	eal Property.	
	He/She has authority to Open Bank Account(s) in Name of th	
	He/She has authority to Close Bank Account(s) Owned by the	LLC.
	He/She has authority to Use, Execute, Negotiate, and/or Assig	m LLC Debit/Credit

Cards and/or other instruments of payment on behalf of the LLC.

	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Personal
Proper	rty (Ex: Vehicles/Eguipment).
	He/She has authority to Enter into Contract(s) for the Purchase of Personal
Proper	rty (Ex: Vehicles/Equipment).
	He/She has authority to Enter into Contract(s) for the Purchase of Supplies.
	He/She has authority to Enter into Contract(s) for the Purchase of Material(s).
	He/She has authority to Enter into Contract(s) for the Purchase of Merchandise.
	He/She has authority to Enter into Contract(s) for the Purchase of Services.
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Supplies.
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Material(s).
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's
Merch	andise.
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Services.
	He/She has authority to Enter into and maintain Contract(s) for Insurance Services
on beh	nalf of the LLC.
	He/She has authority to File Annual Reports with State of Florida.
	He/She has authority to Amend Annual Reports with State of Florida.
	He/She has authority to File Statement of Authority(s) with State of Florida.
	He/She has authority to Amend/Cancel/Renew Statement of Authority(s) in State of
Florida.	
	He/She has authority to Amend Articles of Organization.
Mem	ber #2
NAMI	E: KEVIN KIRCHNER
ADDR	RESS: 13351 SADDLE ROAD, SUITE 205
	FORT MYERS, FL 33913
B	All Authorization to act on behalf of the LLC, including but not limited to Options
Listed	Below (Unlimited Authority).
	He/She has Authority to Execute an Instrument Conveying (Sale/Lease) Real
Proper	rty Owned by the LLC.
	He/She has Authority to Purchase Property in the Name of the LLC.
	He/She has authority to Enter into Contract(s) for the Maintenance/ Improvement
of Rea	l Property.
	He/She has authority to Open Bank Account(s) in Name of the LLC.
	He/She has authority to Close Bank Account(s) Owned by the LLC.
	He/She has authority to Use, Execute, Negotiate, and/or Assign LLC Debit/Credit
Cards	and/or other instruments of payment on behalf of the LLC.

☐ He/She has authority to Enter into Contract(s) for the Maintenance/ Improvement	
of Real Property.	
☐ He/She has authority to Open Bank Account(s) in Name of the LLC.	
☐ He/She has authority to Close Bank Account(s) Owned by the LLC.	
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☐ He/She has authority to Amend/Cancel/Renew Statement of Authority(s) in State of	
Florida.	
☐ He/She has authority to Amend Articles of Organization.	
Manager #3	
NAME: JOHN IRVIN	
SPECIFIC TITLE: OFFICE MANAGER	
SI DELITE TITLE. OF FICE MANAGER	
ADDRESS: 13351 SADDLE ROAD, SUITE 205	
FORT MYERS, FL 33913	
☐ All Authorization to act on behalf of the LLC, including but not limited to Options	
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	He/She has authority to Amend/Cancel/Renew Statement of Authority(s)-in State of
Florida	a.
	He/She has authority to Amend Articles of Organization.
	S. T.
HALO	METAL FINISHING, LLC;
	The state of the s
D- 6	Translanding State of
ву	San
Drint M	lame: RYAN BRINGARDHER
Print N	ALIE. INN OKINGARUNUN
Title	MANAGER

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