

L180000085331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

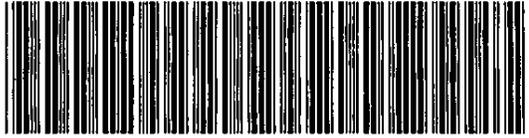
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 16 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BPG Builders, 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:

John R Ginn, Esq

Name of Person

Ginn & Patrou, PA

Firm/Company

770 A1A Beach Blvd., Ste D

Address

St. Augustine, FL 32080

City/State and Zip Code

jginn@ginnpatrou.com

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

For further information concerning this matter, please call:

John Ginn

at (904) 4613000

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

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: BPG Builders, LLC

SECOND: The Florida Document Number of the limited liability company is: 400311539314

THIRD: The street address of the limited liability company's principal office is:
770 A1A Beach Blvd., Ste D
St. Augustine, FL 32080

The mailing address of the limited liability company's principal office is:
770 A1A Beach Blvd., Ste D
St. Augustine, FL 32080

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: John R Ginn

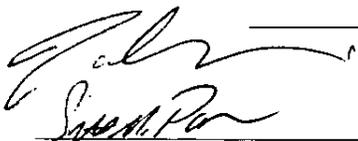
b. No authority granted to: _____

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

a. Granted to: John R Ginn

b. No authority granted to: _____

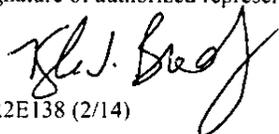
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Signature of authorized representative

John R. Ginn
Scott M Patron

Typed or printed name of signature



Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)