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## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT:	Pinnacle Brick Pavers and Stone, LLC		
		Limited Liability Com	pany
Dear Sir or	Madam:		
The enclose	d Statement of Authority and fee(s) are	e submitted for filing.	
Please return	n all correspondence concerning this n	natter to the following	:
Jack G. \	Williams		
	Name of Person		•
Jack G. \	Williams, Attorney at Law		
	Firm/Company		•
Post Offi	ce Box 2176		
	Address		•
Panama	City, FL 32402		
	City/State and Zip Code		
mickie.w	illiamspclaw@gmail.com		
E-	mail address: (to be used for future and	nual report notification	n)
For further i	information concerning this matter, ple	ease call:	
Jack G. \	Williams	850	763-5368
	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: Pinnacle Brick Pavers and Stone, 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: 299 West 23rd Place Panama City, FL 32405 The mailing address of the limited liability company's principal office is: 299 West 23rd Place Panama City, FL 32405 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. Granted to: Troy F. Syfrett, Jr. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: Troy F. Syfrett, Jr. No authority granted to: Thomas P. Elder

Filing Fee:

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

Typed or printed name of signature

CR2E138 (2/14)

Signature of authorized representative