L18000264695

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: TRIPP CONSULTANTS, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and filing fee of \$25.00 is submitted for filing. Please return all correspondence concerning this matter to the following:

JOSIAH TRIPP
Name of Manager
TRIPP CONSULTANTS, LLC
Name of Company
8661 Athena Court
Address of Company
Lehigh Acres, FL 33971
City/State and Zip Code
E-mail Address of Manager

For further information concerning this matter, please call:

Alison Marsicovetere at 941-627-1000

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 20 FCD 27 PM 1.50

This instrument Prepared By and Return To: WIDEIKIS, BENEDICT & BERNTSSON, LLC - THE BIG W LAW FIRM John L. Wideikis, Esq. 3195 S. Access Road Englewood, FL 34224



STATEMENT OF AUTHORITY

Pursuant to 605,0302,	Florida Staty	tes, this limited lia	ability company submits the I	following statement
of authority on this <u>79 </u>	day of	the	ability company submits the , 2020, and same sha	all be effective for a
period of five (5) years fror	n the date of the	his Statement unle	ess sooner terminated as so	permitted by law:

FIRST: The name of the limited liability company is: TRIPP CONSULTANTS, LLC

SECOND: The Florida Document Number of the limited liability company is: L18000264695

THIRD: The street address of the limited liability company's principal office is: 8661 Athena Court, Lehigh Acres, FL 33971

The mailing address of the limited liability company's principal office is: 8661 Athena Court, Lehigh Acres, FL 33971

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 matters enumerated below:

- May execute instruments transferring real and personal property held in the name of the company, including by way of example and not by way of limitation, Warranty Deeds, Closing Statements, Bills of Sale, Closing Affidavits and Certificates, and Closing Statement Addendums.
 - a. Granted to: JOSIAH TRIPP, as Manager.
 - b. No authority granted to:
- May enter into other transactions on behalf of the company, or otherwise act for or bind the company in all matters, including by way of example and not by way of limitation, the pledge of company property by mortgage, security agreement or otherwise; the borrowing of money on behalf of the company through execution of promissory notes or otherwise; the execution of guaranties on behalf of the company; and the execution of any other loan documents on behalf of the company.
 - a. Granted to: JOSIAH TRIPP, as Manager.
 - b. No authority granted to:

The undersigned goes hereby certify the accur	acy of the statements set forth herein.
Signature of authorized representative	JOSIAH TRIPP, as Manager Printed name and position title
STATE OF FC COUNTY OF LEE	
CONSULTANTS, LLC, a Florida limited liability	pefore me by means of https://physical.presence.oronline_, 2020, by JOSIAH TRIPP, as Manager of TRIPP or company who is personally known to me or who has as identification and who did take an oath.
Kerri A. Reed NOTARY PUBLIC STATE OF FLORIDA Comm# GG101486 Expires 5/4/2021	Notary Public, State of My Commission Expires: (Seal)