

L19 0000297376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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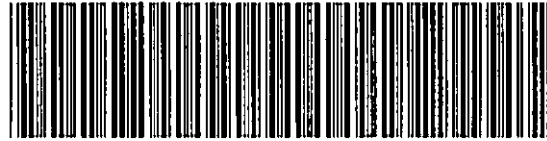
(Business Entity Name)

(Document Number)

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MAR 31 2021  
S. YOUNG

2021 FEB 10 PM 7:24  
S. YOUNG

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SOUTHFORK TOWERS, 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:

*Effective  
2-9-2021*

BRIAN ROSE  
Name of Person

SOUTHFORK TOWERS, LLC  
Firm/Company

111 S. ARMENIA AVE.; SUITE 201  
Address

TAMPA, FL 33609  
City/State and Zip Code

BROSE@EISENHOWERPROPERTYGROUP.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN ROSE at (813) 610-3043  
Name of Person Area Code Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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: SOUTHFORK TOWERS, LLC

SECOND: The Florida Document Number of the limited liability company is: L19000297376

THIRD: The street address of the limited liability company's principal office is:

111 S. ARMENIA AVE.

SUITE 201

TAMPA, FL 33609

The mailing address of the limited liability company's principal office is:

111 S. ARMENIA AVE.

SUITE 201

TAMPA, FL 33609

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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: NICHOLAS J. DISTER

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: NICHOLAS J. DISTER

b. No authority granted to: \_\_\_\_\_

Signature of authorized representative

JEFFERY S. HILLS

Typed or printed name of signature

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