

h20000025096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

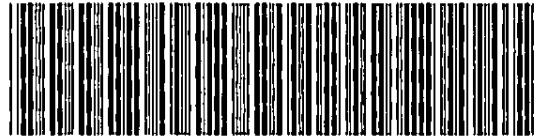
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SP Homes 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:

Salvis Pogulis

Name of Person

SP Homes LLC

Firm/Company

1075 Orienta Ave Suite A

Address

Altamonte Springs, FL 32701

City/State and Zip Code

sal.pogulis@gmail.com

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

For further information concerning this matter, please call:

Salvis Pogulis

407

7567900

at (_____) _____

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: SP Homes LLC

SECOND: The Florida Document Number of the limited liability company is: L20000025096

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

1075 Orienta Ave, Ste A

Altamonte Springs, FL 32701

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

1075 Orienta Ave, Ste A

Altamonte Springs, FL 32701

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.

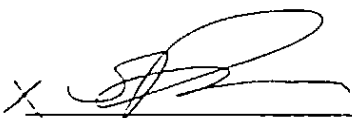
a. Granted to: Signija Savica

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: Signija Savica

b. No authority granted to: _____

X 
Signature of authorized representative

SALVIS POGULIS
Typed or printed name of signature

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

2022 SEP 14 AM 10:28



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Detail by Entity Name

Florida Limited Liability Company
SP HOMES LLC

Filing Information

Document Number	L20000025096
FEI/EIN Number	84-4958189
Date Filed	01/27/2020
Effective Date	10/02/2017
State	FL
Status	ACTIVE
Last Event	CONVERSION
Event Date Filed	01/27/2020
Event Effective Date	NONE

Principal Address

1075 ORIENTA AVE SUITE A
ALTAMONTE SPRINGS, FL 32701

Mailing Address

1075 ORIENTA AVE SUITE A
ALTAMONTE SPRINGS, FL 32701

Registered Agent Name & Address

POGULIS, SALVIS
1075 ORIENTA AVE SUITE A
ALTAMONTE SPRINGS, FL 32701

Authorized Person(s) Detail

Name & Address

Title MGR

POGULIS, SALVIS
1075 ORIENTA AVE SUITE A
ALTAMONTE SPRINGS, FL 32701

Annual Reports

Report Year	Filed Date
2021	02/01/2021
2022	04/06/2022

Document Images

04/06/2022 -- ANNUAL REPORT

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02/01/2021 -- ANNUAL REPORT

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01/27/2020 -- Florida Limited Liability

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