

5/6/22, 11:50 AM

Division of Corporations

L21000287593

Florida Department of State  
Division of Corporations  
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To:

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Fax Number : (850)617-6383

From:

Account Name : WARD, DAMON & POSNER, P.A.  
Account Number : 072262000447  
Phone : (561)842-3000  
Fax Number : (561)842-3626

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: aseligmar@warddamon.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
FPC OFFICE HOLDINGS, LLC

Certificate of Status	0
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2022 MAY -6 PM 2:59  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

T. LEMIEUX

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: FPC OFFICE HOLDINGS, 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:

Adam R. Seligman, Esq.

\_\_\_\_\_  
Name of Person

Ward Damon PL

\_\_\_\_\_  
Firm/Company

4420 Beacon Circle

\_\_\_\_\_  
Address

West Palm Beach, Florida 33407

\_\_\_\_\_  
City/State and Zip Code

Tgerhardt@frostpointcapital.com

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

For further information concerning this matter, please call:

Adam R. Seligman, Esq.

at ( 561 ) 515-5674

\_\_\_\_\_  
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: FPC OFFICE HOLDINGS, LLC

**SECOND:** The Florida Document Number of the limited liability company is: L21000287593

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

120 South Olive Avenue, Suite 404

West Palm Beach, Florida 33401

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

120 South Olive Avenue, Suite 404

West Palm Beach, Florida 33401

**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: N/A

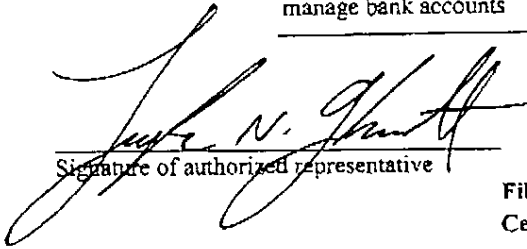
b. No authority granted to: N/A

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

a. Granted to: Paul Forberger

repair/construction agreements, permits, leasing contracts and related matter

b. No authority granted to: Sell, mortgage encumber the property or open  
manage bank accounts

  
Signature of authorized representative

Taylor N. Gerhardt, Manager

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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