# LZI 000383327

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# COVER LETTER

TO: Registration Section Division of Corporations	·		1		, "
CALLS FOR COOLING LLC SUBJECT:					
Name of Limited	Liability Co	ompany			
Dear Sir or Madam:					
The enclosed Statement of Authority and fee(s) are subm	itted for filin	ıg.			
Please return all correspondence concerning this matter to	the followi	ng:			
CHARLES G. ENNIS					
Name of Person	· · · · · · · · · · · · · · · · · · ·	<del></del>			
CALLS FOR COOLING LLC					
Firm/Company		_			
1913 DEWITT STREET					
Address		<del></del>			
PANAMA CITY, FL 32401					
City/State and Zip Code				당	2021
griff@remsco.com					2021 OCT 18
E-mail address: (to be used for future annual re-	ort notificat	ion)			8
For further information concerning this matter, please ca	il:				AH II: 21
CHARLES ENNIS	850	428-1585		<u> </u>	1: 20
Name of Person	Area Cod	e Daytin	ne Telej	phone Nui	mber

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

authority:  FIRST: The name of the limited liability company is:   CAL	LS FOR COOLING LLC
SECOND: The Florida Document Number of the limited lia	1.21000383327
<b>SECOND:</b> The Florida Document Number of the limited lix	ibility company is:
THIRD: The street address of the limited liability company 1913 DEWITT STREET	's principal office is:
PANAMA CITY, FL 32401	
The mailing address of the limited liability compa	any's principal office is:
PANAMA CITY, FL 32401	
FOURTH: This statement of authority grants or sets limitat position of a person in a company, whether as a member, trait person on the following:  1. May execute an instrument transferring real process. Granted to:  CHARLES G. ENNIS  b. No authority granted to:	operty held in the name of the company.
2. May enter into other transactions on behalf of, a. Granted to: CHARLES G. ENNIS	or otherwise act for or bind, the company.
b. No authority granted to:	
21/5_	CHARLES G. ENNIS
Signature of authorized representative Filing Fee: Certified Conv	Typed or printed name of signature \$25.00 (optional)