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COVER LETTER

TO:	Registration Section Division of Corporations				
eup ie	EPG TWO RIVERS HOLDING	GS IX, LLC			
SUBJE		imited Liability Co	mpany		
Dear S	r or Madam:				
The en	closed Statement of Authority and fee(s) are	e submitted for filin	g.		
Please	return all correspondence concerning this n	natter to the following	ng:		
BRIA	N ROSE		Eff. - 10-8-21		
	Name of Person		- 10-5-21		
EPG T	WO RIVERS HOLDINGS IX, LLC				
	Firm/Company	<u> </u>			
111 S.	ARMENIA AVE.; SUITE 201				
	Address		_		
TAMI	A, FL 33609				
	City/State and Zip Code		_		
brose(Deisenhowerpropertygroup.com				
	E-mail address: (to be used for future and	nual report notificat	ion)		
For fur	ther information concerning this matter, ple	ease call:	€.	2(
Brian	Rose	813 at (610-3043 Z C	2021 OCT 1	
	Name of Person	Area Cod	Daytime Telephone Number	CT 15	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee	AM 10: 16	g d ores a na _m

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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: ______ EPG TWO RIVERS HOLDINGS IX, LLC **SECOND:** The Florida Document Number of the limited liability company is: 1.21000437606 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 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. Granted to: NICHOLAS J. DISTER b. No authority granted to: May enter into other transactions on behalf of, or otherwise act for or bind, the company. Granted to: NICHOLAS J. DISTER b. No authority granted to:

JEFFERY S. HILLS

Typed or printed name of signature

Filing Fee:

\$25.00

Certified Copy: \$30.00 (optional)

Signature of author

goda epresentative