121000459733

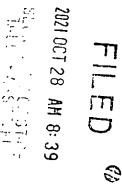
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C. BRUMBLE.

COVER LETTER

TO:	Registration Section Division of Corporations	;	Ŗ	,
SUBJ	EPG TWO RIVERS HILLSBORO	UGH, LLC		
3003	Name of Limit	ed Liability (Company	
Dear S	ir or Madam:			
The er	closed Statement of Authority and fee(s) are sub	mitted for fil	ling.	
Please	return all correspondence concerning this matter	r to the follow	wing:	Eff. 10/25/21
BRIA	N ROSE			10/25/21
-	Name of Person		_	/ /
EPG '	TWO RIVERS HILLSBOROUGH, LLC			
	Firm/Company			
111 S	ARMENIA AVE.; SUITE 201			
	Address			
TAM	PA. FL 33609			
	City/State and Zip Code	***		
brose	@eisenhowerpropertygroup.com			
	E-mail address: (to be used for future annual	report notific	ation)	
For fu	ther information concerning this matter, please of	call:		
Brian	Rose	813	610-304	3
	Name of Person	Area Co	ode Dayti	me 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

uthority:	section 605.0302(1), Florida Statutes, this limited liability company submits the follower.	
TRST: Th	ne name of the limited liability company is: EPG TWO RIVERS HILLSBOROUC	iff, LLC
SECOND:	The Florida Document Number of the limited liability company is: L21000459733	
	he street address of the limited liability company's principal office is:	
	1 S. ARMENIA AVE.	
SU	JITE 201	_
	AMPA, FL 33609	_
	The mailing address of the limited liability company's principal office is: 1 S. ARMENIA AVE.	
St	JITE 201	_ _
TA	AMPA, FL 33609	
	May execute an instrument transferring real property held in the name of the compa. a. Granted to: NICHOLAS J. DISTER	_
	b. No authority granted to:	2021 OCT 28
2.	May enter into other transactions on behalf of, or otherwise act for or bind, the co a. Granted to:	— **
	b. No authority granted to:	
	JEFFERY S. HILLS	_
	f authorized representative Typed or printed name	

. . . .