## L0800027644

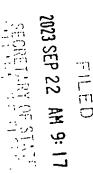
(Requestor's Name)					
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(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Stat	us				
Special Instructions to Filing Officer:					
J DENIVIO					
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Office Use Only



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## COVER LETTER

TO:	Reg Div	istration Section ision of Corporations				
SUBJEC	CT:	ATEC LOGISTICS, LLC				
		Name of Limited Liability Company				
Dear Si	r or N	·ladam:				
The end	:losec	d Statement of Authority and fee(s) ar	e submitted for filing.			
Please r	return	all correspondence concerning this n	natter to the following	:		
KENN	ЕТН	BOHANNON				
	<del></del>	Name of Person				
CORO	NAD	O LAW GROUP, PLLC				
	_	Firm/Company				
221 NO	ORTI	I CAUSEWAY, SUITE A				
		Address				
NEW S	SMY	RNA BEACH, FL 32169				
		City/State and Zip Code	· • · · · · · · · · · · · · · · · · · ·			
КВОН	ANN	ON@CFLLAWYER.COM				
	E-:	nail address: (to be used for future an	nual report notification	n) (n		
For fur	ther i	nformation concerning this matter, pl	ease call:			
KENN	ЕТН	BOHANNON	386 at (	427-5227		
		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: ATEC LOGISTICS, LLC SECOND: The Florida Document Number of the limited liability company is: 108000027644 THIRD: The street address of the limited liability company's principal office is: 2170 W STATE ROAD 434 SUITE 400 LONGWOOD, FL 32779 The mailing address of the limited liability company's principal office is: 2170 W STATE ROAD 434 SUITE 400 LONGWOOD, FL 32779 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:\_\_\_\_ 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 : MARTHA PAEZ b. No authority granted to: MARTHA PAEZ Signature of authorized representative Typed or printed name of signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)