

L090000063840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

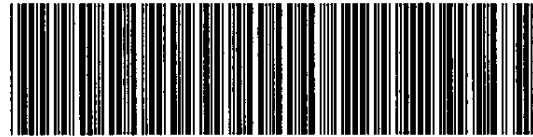
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100258166371

03/24/14--01042--003 \*\*25.00

FILED  
14 MAR 24 AM 10:49  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

MAR 27 2014

T. BROWN

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BLB TRADING 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:

**DAVID FRATANGELO**

Name of Person

ASSET RECOVERY MANAGEMENT

Firm/Company

13778 OLD ROVER ROAD

Address

WEST FRIENDSHIP, MD 21794

City/State and Zip Code

DAVE@ASSETSRC.COM

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

For further information concerning this matter, please call:

David Fratangelo

Name of Person at ( 301 ) 728-0646  
Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 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: BLB TRADING LLC

**SECOND:** The Florida Document Number of the limited liability company is: L09000063840

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

1900 SUNSET HARBOUR DR. 2ND FL ANNEX

MIAMI BEACH, FL 33139

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

1900 SUNSET HARBOUR DR. 2ND FL ANNEX

MIAMI BEACH, FL 33139

**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: JAMES FRATANGELO, ILONNA ASHUROVA

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: JAMES FRATANGELO, ILONNA ASHUROVA

b. No authority granted to: \_\_\_\_\_

**FIFTH:** This document is to be effective as of January 1, 2013, all other agreements, powers of attorney or documents granting authority to ANY individual(s) are hereby revoked, are un-enforceable and are null and void.



Signature of authorized representative

James Fratangelo

Typed or printed name of signature

Filing Fee: **\$25.00**

FILED  
14 MAR 24 AM 10:49  
CLERK OF STATE  
TALLAHASSEE, FLORIDA