

L14000031458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

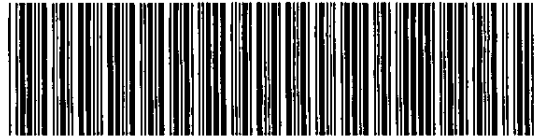
(Business Entity Name)

(Document Number)

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

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2016 OCT 26 P 12:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
OCT 27 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NUMBED HOLDINGS, 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:

**SCOTT A FRANK, ESQ.**

Name of Person

**LAW OFFICES OF SCOTT A FRANK, PA**

Firm/Company

**5301 N FEDERAL HIGHWAY, SUITE 170**

Address

**BOCA RATON, FL 33487**

City/State and Zip Code

**SFRANK@SAFLAW.COM**

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

For further information concerning this matter, please call:

**SCOTT A FRANK**

Name of Person

**561**

Area Code

**826-5400**

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: NUMED HOLDINGS, LLC


**SECOND:** The Florida Document Number of the limited liability company is: L14000031458

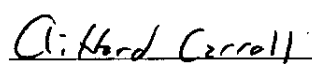
**THIRD:** The street address of the limited liability company's principal office is:  
2840 S OCEAN BLVD APT 504 PALM BEACH, FL 33480

The mailing address of the limited liability company's principal office is:  
2840 S OCEAN BLVD APT 504 PALM BEACH, FL 33480

**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: TODD STEPHENS and CLIFFORD CARROLL  
each of whom may act solely without the other
  - 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: TODD STEPHENS and CLIFFORD CARROLL  
each of whom may act solely without the other
  - b. No authority granted to: \_\_\_\_\_

  
Signature of authorized representative

  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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