

L14000184797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

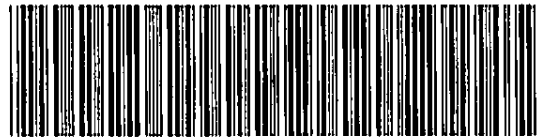
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
18 JAN 31 PM 4:42

K. SALY
FEB 1 2018

M|S Maspons & Sellek
attorneys at law

January 25, 2018

VIA U.S. MAIL

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Statement of Authority for Logan Auto Transport, LLC, a Florida limited liability company

M&S File No.:2267001

Dear Sir/Madam:

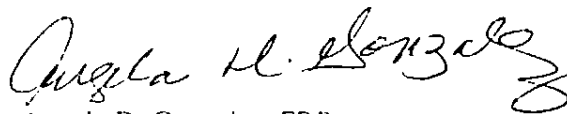
In connection with the above-referenced matter, we are enclosing our cover letter with our Statement of Authority filing same. Also, please find enclosed our Operating Account Check #4901 in the amount of \$25.00 representing the filing fees for the referenced Statement of Authority.

Please find enclosed a self-stamped addressed envelope for returning a copy of the filed Statement of Authority to our offices.

Should you have any question, please do not hesitate to contact us.

Very truly yours,

MASPONS & SELLEK, LLP



Angela D. Gonzalez, FRP

/adg
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOGAN AUTO TRANSPORT, 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:

Mercedes M. Sellek, Esq.

Name of Person

Maspons & Sellek, LLP

Firm/Company

2333 Ponce de Leon Blvd., Suite 314

Address

Coral Gables, FL 33134

City/State and Zip Code

msellek@maspons.com

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

For further information concerning this matter, please call:

Mercedes M. Sellek at (**786**) **539-1425**
Name of Person 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: LOGAN AUTO TRANSPORT, LLC

SECOND: The Florida Document Number of the limited liability company is: L14000184797

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

2676 NW 88TH ST

MIAMI, FL 33147

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

2676 NW 88TH ST

MIAMI, FL 33147

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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.

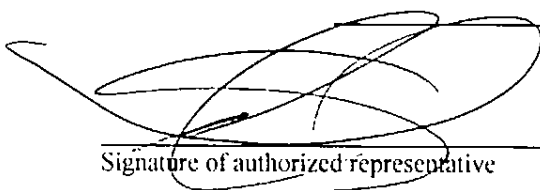
a. Granted to: Geovanis Medina

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: Geovanis Medina

b. No authority granted to: _____



Signature of authorized representative

Geovanis Medina, Manager & Member

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)