

L16000045639

(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



800291160118

10/17/16--01041--019 *#5500

2016 OCT 17 P 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

OCT 18 2016

LAW OFFICES
MARK J. BERKOWITZ, P.A.

800 S.E. THIRD AVENUE
SUITE 400
FT. LAUDERDALE, FL 33316

TELEPHONE: (954) 527-0570
TOLL FREE: (877) 991-7117

SATELLITE OFFICE
701 BRICKELL AVENUE
SUITE 1500
MIAMI, FL 33131

TELECOPIER: (954) 767-0483
EMAIL: labor@markjberkowitz.com
WEBSITE: www.markjberkowitz.com

Via Overnight Mail

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

October 14, 2016

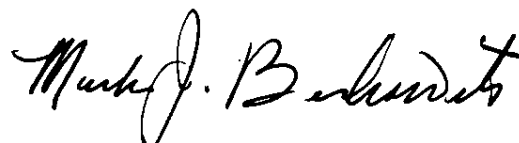
Re: **M3 Aviation Services, LLC**
Authorization for Limited Liability Company

Gentlemen:

I am enclosing a completed authorization form for M3 Aviation Services, LLC, which has been signed by my client, Mr. Pedro Mesa, on behalf of the LLC. I am also enclosing a cashier check, in the amount of \$30.00, in order to obtain a certified copy of the document. Please return the certified copy, by using the enclosed Federal Express pre-printed air-bill. My Account No. is [REDACTED]

If you require any additional information, please call me at the office, (954) 527-0570, at your earliest convenience.

Yours truly,



Mark J. Berkowitz

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M3 AVIATION SERVICES 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:

PEDRO MESA
Name of Person

M3 AVIATION SERVICES LLC
Firm/Company

12300 NW 26 ST
Address

Plantation, FL 33323
City/State and Zip Code

pmesa@m3aviationservices.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO MESA at (954) 643-8052
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: M3 AVIATION services LLC

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

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

12300 NW 265T
PLANTATION, FL 33323

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

12300 NW 26 ST
Plantation, FL 33323

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: Pedro Mesa

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: Pedro Mesa

b. No authority granted to: _____

Signature of authorized representative

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)