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(Requestor's Name)		
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(Business Entity Name)		
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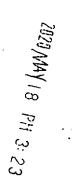
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COVER LETTER

Division of Corporations		
SUBJECT: MLX 21 Company, LLC Name of Limited Liability Company		
Plante of Elimited Elability 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:		
MARIANO GONZALEZ Name of Person		
MLX 21 COMPANY, LLC Firm/Company		
11251 M 20th Street Scite 119		
MiAMi FL 33177 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
MARIANO GONZALEZ at (7-PG) 73/1637 Name of Person Area Code Daytime Telephone Number		
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 fol authority:	
FIRST: The name of the limited liability company is: MLX 21 COM1	PANY LLC
SECOND: The Florida Document Number of the limited liability company is:	0000 47 849
THIRD: The street address of the limited liability company's principal office is: 11251 NW 20 ⁺⁴ Street # 119	
MiAMI FL 33172	20
The mailing address of the limited liability company's principal office is:	2020 HAY
11251 NW 20th Street #119	
MiAMI FC 33172	PH ::
	—
FOURTH: This statement of authority grants or sets limitations of authority on all persons ha position of a person in a company, whether as a member, transferee, manager, officer or otherw person on the following: 1. May execute an instrument transferring real property held in the name of the com-	rise or to a specific
a. Granted to: MARIANO GONZALEZ	,
ANY AND ALL DOCUMENTS FOR THE SA	
PROPERTY LOCATED AT- 2275G SCO 92 CT, b. No authority granted to:	Curter Bzy, FL
2. May enter into other transactions on behalf of, or otherwise act for or bind, the coa. a. Granted to:	ompany.
b. No authority granted to:	
DocuSigned by:	
Dalila Gonzalez Costal May 7, 2020 Jose Gonzalez February	
Signature of authorized representative Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	ne of signature