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FEB 16 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MABEX, 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:

**ALEX NEGRIN**

Name of Person

**MABEX, LLC**

Firm/Company

**300 SW 107 AVE, #114**

Address

**MIAMI, FL 33174**

City/State and Zip Code

**alexfn2002@yahoo.com**

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

For further information concerning this matter, please call:

**ALEX NEGRIN**

Name of Person

at ( **305** ) **9891538**

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 FOR**  
**MABEX, LLC**

Pursuant to Section 605.0302, Florida Statutes, this limited liability company submits the following statement of authority:

**FIRST:** The name of the limited liability company is: MABEX, LLC;

**SECOND:** The Florida Document Number of the limited liability company is:  
L16000167500;

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

300 SW 107 AVE  
114  
MIAMI, FL 33174

The mailing address of the limited liability company is:

300 SW 107 AVE  
114  
MIAMI, FL 33174

**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 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: ALEX NEGRIN
  - b. No authority granted to: N/A
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company:
  - a. Granted to: ALEX NEGRIN
  - b. No authority granted to: N/A

Berta Negrin  
Signature of authorized representative

BERTA NEGRIN  
Typed of printed name of signature

José M. Negrin  
Signature of authorized representative

José M. Negrin  
Typed of printed name of signature

Alex F. Negrin  
Signature of authorized representative

ALEX F. NEGRIN  
Typed of printed name of signature

FILED  
17 FEB 13 AM 9:55  
MIAMI, FL 33174