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COVER LETTER

	gistration Section vision of Corporations				
SHR IFCT.	JMIX Holdings LLC				
SOBJECT		imited Liability Cor	npany		
Dear Sir or l	Madam:				
The enclosed	d Statement of Authority and fee(s) an	e submitted for filing	3.		
Please returi	n all correspondence concerning this n	natter to the followin	g:		
Joshua M. M	Mittenthal, Esq.				
·	Name of Person	·	_		
Mittenthal V	Weinstein LLP				
	Firm/Company		_		
3100 S. Fed	deral Hwy., Ste. B				
	Address	<u>.</u>	_		
Delray Beac	ch, FL 33483				
	City/State and Zip Code		_		
imannr181@	@gmail.com				
E-r	mail address: (to be used for future and	nual report notification	on)		
For further i	information concerning this matter, ple	ease call:			
Joshua M. M	Mittenthal, Esq.	561 at (862-0955		
	Name of Person	Area Code			
	ailing Address:		Street Address:		
	gistration Section		Registration Section		
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

STATEMENT OF AUTHORITY

authority					
FIRST:	The name of the limited liability	company is: JMIX Holdin	ngs LLC		
SECON	D: The Florida Document Numb	er of the limited liability co	ompany is: L19000053141		-
THIRD:	The street address of the limited 251 SE 12th St., Pompano Beach		pal office is:	SECK	2022年
	The mailing address of the limi 251 SE 12th St., Pompano Beach		ncipal office is:	LAHASSEL	TILEU 2022 MAR 28 PM 6: 39 DETARY OF STATE
				<u> </u>	FL BY
position o	H: This statement of authority grof a person in a company, whethen the following:				
	May execute an instrument to a. Granted to: Isaac A.	Mann	eld in the name of the comp	•	
	b. No authority grante				
	2. May enter into other transaction a. Granted to: $\frac{1saac}{}$		wise act for or bind, the cor	mpany.	
	b. No authority grante	d to: Cristy L. Green		_ _ _ ,	
	? m		Isaac A. Mann		
Signature	of authorized representative	Filing Fee: \$25.0 Certified Copy: \$30.0		e of signature	