

L200000 44519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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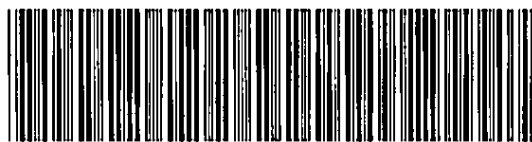
(Business Entity Name)

(Document Number)

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Statement
of
Authority

APR 28 2020

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DENTALEHUB, 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:

Natalia Mena

Name of Person

Firm/Company

3841 SW 145 Place

Address

Miami, Florida 33175

City/State and Zip Code

natymena@gmail.com

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

information concerning this matter, please call:

Natalia Mena

Name of Person

at 305-699-1457

(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: DENTALEHUB, LLC.

SECOND: The Florida Document Number of the limited liability company is: L20000044519.

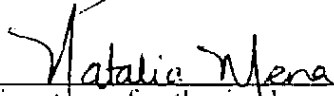
THIRD: The street address of the limited liability company's principal office is: 3841 SW 145th Place, Miami, Florida 33175. The mailing address of the limited liability company's principal office is: 3841 SW 145th Place, Miami, Florida 33175.

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, individually and without the need for consent from any other individual or entity, execute and deliver an instrument(s), including, but not limited to, all acquisition and conveyance documents, including sale and purchase contracts, bills of sale, services agreements, resolutions, affidavits, disclosures and the like for the acquisition/sale of assets by the company, contracting for services to be provided for, by, or on behalf of the Company.
 - a. Granted to: Ahmed Zaidan, Manager; Natalia Mena, Manager; and Steve Mena, Authorized Representative
 - b. No authority granted to: N/A
2. May, individually and without the need for consent from any other individual or entity, enter into other transactions on behalf of, or otherwise act for or bind the Company with respect to the day-to-day operations of the Company.
 - a. Granted to: Ahmed Zaidan, Manager; Natalia Mena, Manager; and Steve Mena, Authorized Representative
 - b. No authority granted to: N/A


Signature of authorized representative
Ahmed Zaidan, Manager

Ahmed Zaidan
Printed Name of Manager


Signature of authorized representative
Natalia Mena, Manager

Natalia Mena
Printed Name of Manager

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)