L21000217252

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2021 JUH 28 AM II: 33 SECRETARY OF SIME

COVER LETTER

	egistration Section vision of Corporations	,	ŧ		
SUBJECT:	MOUNTAIN MINERALS LLC				
	Name of Limited Liability Company				
Dear Sir or	Madam:				
The enclose	ed Statement of Authority and fee(s) ar	e submitted for	filing.		
Please retu	rn all correspondence concerning this n	natter to the fol	lowing:		
CESAR GI	RIJALVA				
	Name of Person				
MOUNTA	IN MINERALS LLC				
	Firm/Company				
66 W FLA	GLER ST, SUITE 900				
	Address				
MIAMI, FI	LORIDA 33130				
	City/State and Zip Code				
LAND@M	IOUNTAINMINERALSLLC.COM				
E	-mail address: (to be used for future and	nual report noti	fication)		
For further	information concerning this matter, ple	rase call:			
CESAR GI	RIJALVA	786 at (``	297-8584	
	Name of Person		Code	Daytime T	elephone Numbe

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E138 (2/14)

ŤΟ:

Registration Section

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: $\frac{MC}{C}$	OUNTAIN MINERALS LLC	
		·	
SECOND: The Flori	da Document Number of the limited	liability company is: L2100021725.	2
THIRD: The street a	ddress of the limited liability compar LER STREET, SUITE 900		
MIAMI, FLO	ORIDA 33130		
	g address of the limited liability com	pany's principal office is:	
MIAMI, FL	ORIDA 33130		
position of a person in person on the following	ement of authority grants or sets limin a company, whether as a member, ting:	transferee, manager, officer or other	wise or to a specific
a.	Granted to: ED HELMS		2021 JUN 28 SECRETARY
Ъ.	No authority granted to: N/A		MIII: 33
2. May er a.	tter into other transactions on behalf of Granted to :		company.
ь.	No authority granted to: N/A		
Mathan c	Sinps	MATTHEW SIMPSO	
Signature of authoriz	Filing Fee:	Typed or printed na \$25.00 opy: \$30.00 (optional)	me of signature

CR2E138 (2/14)