

(Red	questor's Name)	
(Add	dress)	
		<u></u>
(Add	dress)	
	ulChaha (Zia (Dhana	- 40
(City	y/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



500392752635

08/19/22--01010--031 \*\*25.00

2022 AUG 19 AM IG: 57

NOV 3 0 2027 S. PRATHE

## COVER LETTER

TO: Registration Section Division of Corporation	as		
MNB USA Holdin	ngs, LLC		
SUBJECT:	Name of Limited	3 Liability Con	pany
Dear Sir or Madam:			
The enclosed Statement of Author	ority and fee(s) are subn	nitted for filing.	
Please return all correspondence	concerning this matter t	o the following	μ
Luca Di Nunzio			
Name o	of Person		-
Dorcey Law Firm			
Firm/Co	ompany		-
10181 Six Mile Mile Cypress Pl	kwy. Suite C		
Addr	ess		-
Fort Myers, FL 33966			
City/State and	Zip Code		-
support@dlfregisteredagent.con	n		
E-mail address: (to be	used for future annual re	port notificatio	n)
For further information concerni	ing this matter, please co	lt:	
Luca Di Nunzio	а	239 t (	308-1073
Name of Perso		Area Code	Daytime Telephone Number
Mailing Address:			Street Address:
Registration Section			Registration Section
Division of Corpora	ations		Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

•

TO:

## STATEMENT OF AUTHORITY

	ant to section 605.0302(1). Florida Statutes, this limited liability company wing statement of authority:	submits	the 2022
NAM	IE OF LLC: MNB USA HOLDINGS, LLC	: :- :-	AUG 19
FLOI	rida llc document number: <u>L22000156592</u>		
PRIN	ICIPAL OFFICE ADDRESS: 6391 Corporate Park Cir Ste 1, Fort Myers, FL		AM IC: 57
МАП	LING ADDRESS (if different): 6391 Corporate Park Cir Ste 1, Fort Myers, Fl	33966	
MAN	SAGER: Sarac Management, LLC		
this poinclud	w is the authority given to Sarac Management, LLC, Manager of the above-nan erson has unlimited authorization, the option "All Authorization to act on behalf ding but not limited to the Options Listed Below (Unlimited Authority)" will be apply to Him/Her.	of the LI	LC.
⊠ Liatod	All Authorization to act on behalf of the LLC, including but not limited to the	Options	
	I Below (Unlimited Authority).  He/She has Authority to Execute an Instrument Conveying (Sale/Lease) Realed by the LLC.	Property	
	He/She has Authority to Purchase Property in the Name of the LLC.		
	He/She has authority to Enter into Contract(s) for the Maintenance/ Improven	ent of R	eal
Prope	•		
	He/She has authority to Open Bank Account(s) in Name of the LLC.		
	He/She has authority to Close Bank Account(s) Owned by the LLC.		
nd/or	He/She has authority to Use, Execute, Negotiate, and/or Assign LLC Debit/Cor other instruments of payment on behalf of the LLC.	edit Caro	ls
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Perso	nal	
	erty (Ex: Vehicles/Equipment).	iiai	
	He/She has authority to Enter into Contract(s) for the Purchase of Personal Pro-	operty (E	X:
Vehic	eles/Equipment).		
	He/She has authority to Enter into Contract(s) for the Purchase of Supplies.		
	He/She has authority to Enter into Contract(s) for the Purchase of Material(s).		
	He/She has authority to Enter into Contract(s) for the Purchase of Merchandis	e.	

Page 1 of 2
Statement of Authority for Sarac Management, LLC

	He/She has authority to Enter into Contract(s) for the Purchase of Services.		
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Supplies	<b>S</b> .	
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Material	l(s).	
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Merchan	ndise.	
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Services	<b>S</b> .	
	He/She has authority to Enter into and maintain Contract(s) for Insurance Service		
behalf	of the LLC.		
	He/She has authority to File Annual Reports with State of Florida.		
	He/She has authority to Amend Annual Reports with State of Florida.		
	He/She has authority to File Statement of Authority(s) with State of Florida.		
	He/She has authority to Amend/Cancel/Renew Statement of Authority(s) in State	e of	
Florida			
	He/She has authority to Amend Articles of Organization.		
If more	e space was needed, a separate sheet(s) of paper will be attached to the back of thi	s form	
MNB I	USA HOLDINGS, LLC;		
By:	Sarac Management, LLC, Manager  Mustafa Saracogullari, as Manager	White wind and a figure	2022 AUG 19 AHIC: 57