

L23000353967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

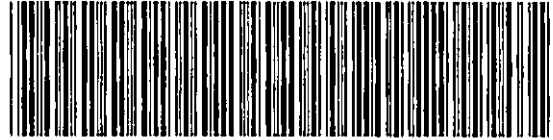
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200414353872

FILED
2023 SEP 11 AM 10:00
TALLAHASSEE, FLORIDA

RECEIVED
2023 SEP 11 AM 11:19
TALLAHASSEE, FLORIDA



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations
From: Alexxis Weiland-Sorenson
Ext: 61592
Date: 09/11/23
Order #: 1263605-1
Re: Massy Distribution Properties LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:
I20000000195

AUTH:

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', written over a horizontal line.

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MASSY DISTRIBUTION PROPERTIES 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:

Steve Charchat

Name of Person

Steven M. Charchat, P.A.

Firm/Company

848 Brickell Avenue, Suite 1040

Address

Miami, Florida 33131

City/State and Zip Code

s.charchat@att.net

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

For further information concerning this matter, please call:

Steve Charchat

Name of Person

305
at (_____) _____
Area Code

358-8005

Daytime Telephone Number

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

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: MASSY DISTRIBUTION PROPERTIES LLC

SECOND: The Florida Document Number of the limited liability company is: L23000353967

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

11305 NW 122ND STREET

MEDLEY, FL 33178

The mailing address of the limited liability company's principal office is:

11305 NW 122ND STREET

MEDLEY, FL 33178

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 execute an instrument transferring real property held in the name of the company.

a. Granted to: AARON SUITE, RYAN FIELDS, AMBIKAH MONGROO,
or DAVID AFFONSO

b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company

a. Granted to: AARON SUITE, RYAN FIELDS, AMBIKAH MONGROO,
or DAVID AFFONSO

b. No authority granted to: _____



Signature of authorized representative

RYAN FIELDS

Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**

TALLAHASSEE, FLORIDA

2023 SEP 11 AM 10:00

FILED