

L24000085644

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : PRIME CORPORATE FILING SERVICES LLC
Account Number : I20230000092
Phone : (786)356-1156
Fax Number : (305)564-6768

2024 FEB 20 PM 3:59

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: INFO@PRIMEFILING.COM

**FLORIDA LIMITED LIABILITY CO.
MBM AVENUES MALL LLC**

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TALLAHASSEE, FLORIDA



((H24000069018 3)))

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" – Authorized Member

"MGR" – Manager

AMBR

MBM CAPITAL HOLDINGS INC 50%
3666 SW 5TH TERRACE
MIAMI, FL 33135

AMBR

Carlos Daniel Hernandez Cuicas 50%
10300 Southside Blvd
Jacksonville, FL 32256

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any:

THE PURPOSE OF THE ENTITY SHOULD BE FOOD AND DRINK SERVICES.

REQUIRED SIGNATURE:

×

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.

Manuel Felipe Romero on behalf of MBM Capital Holdings Inc.

Typed or printed name of signer

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