

L10000036173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

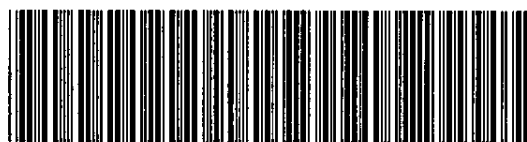
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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A. LUNT

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FL 32304

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: **Mayan Construction Management, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Edwin Vaughn**

Name of Person

**Mayan Construction Management, LLC**

Firm/Company

**986 Gibraltar Road**

Address

**Key Largo, FL 33037**

City/State and Zip Code

**bnsmith0922@yahoo.com**

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

For further information concerning this matter, please call:

**Edwin Vaughn**

Name of Person

at ( **786** ) **521-6488**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☒ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FL

FILED



If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Edwin Vaughn	Edwin Vaughn	<input type="checkbox"/> Add
		986 Gibraltar Road	<input checked="" type="checkbox"/> Remove
		Key Largo, FL 33037	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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FLORIDA  
13 31

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

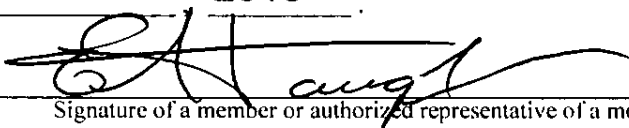
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Dated October 28 2013



Signature of a member or authorized representative of a member

Edwin Vaughn

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2013 NOV 14 PM 3:31  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE