# L22000239321

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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## CORPORATE When you ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN					
	PICK I	J <b>P:</b> 6	/1 LYNES		
XX XX	CERTIFIED COPY PHOTOCOPY CUS FILING	LLC			
1.	MAYAN DEVELOPMENT (CORPORATE NAME AND DOCUME	& MANAG	EMENT, LLC		
2.	(CORPORATE NAME AND DOCUME	NT #)			
3.	(CORPORATE NAME AND DOCUME	NT #)	<del></del>	-	<del> </del>
4.	(CORPORATE NAME AND DOCUME	VT #)	<del>-</del>		
5.	(CORPORATE NAME AND DOCUME	VT' #)			
6.	(CORPORATE NAME AND DOCUME	VT #)	<del>-</del>		
SPECIAI INSTRU	L CTIONS:				

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

2022 JUN - 1 AM 10: 59

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mayan Development & Management, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

14651 Biscayne Bl North Miami Beach	od #301				
	vu., #.)(/)	14	14651 Biscayne Blvd., #301		
	North Miami Beach, FL 33181		North Miami Beach, FL 33181		
nother business entity with ar	ny cannot serve as its own active Florida registration	Registered Agent on.)	ent's Signature: t. You must designate an individual or		
The name and the Florida stree	•				
	Bradford Norman Sn		<del></del>		
		Name			
	14651 Biscayne Blvd	d., #301			
	Florida street addres	s (P.O. Box <u>NOT</u>	acceptable)		
	North Miami Beach,	FL 33181			
	City	State	Zip		
ace designated in this certificate the ragree to comply with the p	v. I hereby accept the apportion of all statutes resulting the statutes of the position of the position of the statutes are statuted as the statutes of the statutes are statuted as the statuted a	ointment as registicelating to the propast registered agen	he above stated limited liability company at the ered agent and agree to act in this capacity. I er and complete performance of my duties, and as provided for in Chapter 605, F.S		

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	Bradford Norman Smith		
	14651 Biscavne Blvd., #301		
	North Miami Beach, FL 33181		
AMBR	Belseri Comerford		
	14651 Biscayne Blvd., #301		
	North Miami Beach, FL 33181	2022 350	
MCD	Pourse Para de la	70.7	<del>==</del> 73
MGR	Roger Rezende		A
	14651 Biscayne Blvd., #301 North Miami Beach, FL 33181		التحدي التحدي
	North Maint Beach, PL 33181	<del>- 芸二</del> -	9
		SS	TT
		10: 59	-
		<u> </u>	
(Use attachment if necessary)		<sub>F0</sub> <b>(b</b>	
	f filing: (O		
	rific and cannot be more than five business da	ys prior to or 90 day	's after
of filing.)	and the annual confidence of the confidence of t	.1.2.1	
iment's effective date on the Department of	eet the applicable statutory filing requirements,	this date will not be i	nsted a
ament's effective date on the Department of	State's records.		

REOUIRED 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.

Ed Tsuji, Authorized Representative

Typed or printed name of signee

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)