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PICK-UP	☐ WAIT	MAIL
. (B	Jusiness Entity Name	·)
(D	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	o Filing Officer	
		

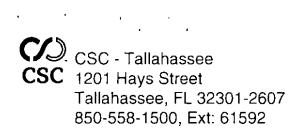
Office Use Only



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To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 02/01/24 Order #: 1412871-1

Re: Mana Tech International, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

120000000195

AUTH:

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

Mana Tecl	h International, LLC			
JI:	Name	of Limited Li	ability Company	
osed Articles of	Organization and fe	e(s) are submi	tted for filing.	
turn all corresp	ondence concerning	this matter to t	he following:	
Kristina Ho	shovsky			
		Nam	e of Person	
M Managen	nent, Inc			
-		Firm	/Company	
215 Coles S	treet			
	 -	А	ddress	
Jersey City,	NJ 07310			
leh o ah o sala se		City/Stat	e and Zip Code	
		e used for fim	re annual report notific	ation)
			ne minual report notine	
г иногиваноп со	incerning this matter,	piease caii:		
Kristina Hos	hovsky	201 _at (798-4710)	
Nan	ne of Person	Area Cod	e Daytime Telepho	one Number
l is a check for t	he following amount	:		
00 Filing Fee	□\$130.00 Filing	Fee & □ us Ce	rtified Copy	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
New F Divisi P.O. E	filing Section on of Corporations		Street Address New Filing Section The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32	hassee reet, Suite 810
	Mana Tech Mana Tech Osed Articles of Sturn all corresp Kristina Ho. M Manager 215 Coles S Jersey City, khoshovsky@ r information co Kristina Hos Nam I is a check for the control of the contr	Name osed Articles of Organization and featurn all correspondence concerning to Kristina Hoshovsky M Management, Inc 215 Coles Street Jersey City, NJ 07310 khoshovsky@mmgmt.net E-mail address: (to be a information concerning this matter, Kristina Hoshovsky Name of Person It is a check for the following amount to Filing Fee Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Mana Tech International, LLC The Name of Limited Limi	Division of Corporations Mana Tech International, LLC TE: Name of Limited Liability Company osed Articles of Organization and fee(s) are submitted for filing. sturn all correspondence concerning this matter to the following: Kristina Hoshovsky Name of Person M Management, Inc Firm/Company 215 Coles Street Address Jersey City, NJ 07310 City/State and Zip Code khoshovsky@mmgmt.net E-mail address: (to be used for future annual report notifice or information concerning this matter, please call: Kristina Hoshovsky Name of Person Area Code Daytime Telephote is a check for the following amount: Of Filing Fee Certificate of Status Name of Person Mailing Address New Filing Section Division of Corporations P.O. Box 6327 The Centre of Talla P.O. Box 6327 The Centre of Talla P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liabilit	y Company is:		
Mana Tech Internation	mal, LLC		
(Must cona	tin the words "Limited	d Liability Company	7, "L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street as	Idress of the principal	effice of the Limite	d Liability Conmany is:
			a area in growthing is.
<u>Principa</u>	al Office Address:		Mailing Address:
19 West Flagler St., S	Suite 310	311	S NW 23rd Street
Miami, FL 33130		Mi	ami, FL 33127
Attention: Property N	fanagement		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its ow ctive Florida registrati	m Registered Agent. ion.)	ent's Signature: You must designate an individual or
		•	
	Corporation Service		
		Name	
	1201 Hays Street		
	Florida street addre	ss (P.O. Box <u>NOT</u> :	acceptable)
	Taliahassee	FL	32301
	City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Corporation Service Company

Wellard- Jrensen, AVP

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Aut "MGR" = Mana	Name and Address; thorized Member	
MGR - Maile		
 -		
(Use attachmen	nt if necessary)	
an effective date is lis date is lis date of filing.)	date, if other than the date of filing: (OPTIONAL) sted, the date must be specific and cannot be more than five business days prior to or 90 day ed in this block does not meet the applicable statutory filing requirements, this date will not be	
e document's effective	e date on the Department of State's records.	
REOUIRED S	SIGNATURE:	<u> </u>
-		
	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.	
	Moishe Mana Typed or printed name of signee	
	r yped or printed name or signee	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)