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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

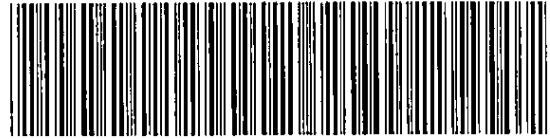
(Business Entity Name)

(Document Number)

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

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STATE OF MISSISSIPPI  
TOLSON, MISSISSIPPI

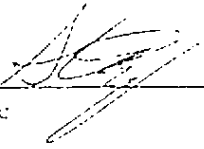
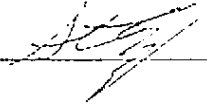
# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224 8870 • 1 800 342-5062 • Fax (850) 222 1222

MAGIS DEVELOPMENT, LLC

Please Debit **FCA000000003** For: 125

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File \_\_\_\_\_  
LTD Partnership File \_\_\_\_\_  
Foreign Corp. File \_\_\_\_\_  
☒ L.C. File \_\_\_\_\_  
Fictitious Name File \_\_\_\_\_  
Trade/Service Mark \_\_\_\_\_  
Merger File \_\_\_\_\_  
Art. of Amend. File \_\_\_\_\_  
RA Resignation \_\_\_\_\_  
Dissolution / Withdrawal \_\_\_\_\_  
Annual Report / Reinstatement \_\_\_\_\_  
Cert. Copy \_\_\_\_\_  
☒ Photo Copy \_\_\_\_\_  
Certificate of Good Standing \_\_\_\_\_  
Certificate of Status \_\_\_\_\_  
Certificate of Fictitious Name \_\_\_\_\_  
Corp Record Search \_\_\_\_\_  
Officer Search \_\_\_\_\_  
Fictitious Search \_\_\_\_\_  
Fictitious Owner Search \_\_\_\_\_  
Vehicle Search \_\_\_\_\_  
Driving Record \_\_\_\_\_  
UCC 1 or 3 File \_\_\_\_\_  
UCC 11 Search \_\_\_\_\_  
UCC 11 Retrieval \_\_\_\_\_  
Courier \_\_\_\_\_

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**ARTICLES OF ORGANIZATION  
OF  
MAGIS DEVELOPMENT, LLC**

The undersigned, being a duly authorized representative of the Member, desiring to form a limited liability company under and pursuant to the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes (the "Act"), does hereby adopt the following Articles of Organization:

**ARTICLE I. NAME**

The name of the limited liability company is **MAGIS DEVELOPMENT, LLC** (the "Company").

**ARTICLE II. ADDRESS**

The principal and mailing address of the Company is 6945 Almansa Street, Coral Gables, FL 33146.

**ARTICLE III. REGISTERED AGENT AND OFFICE**

The Company designates 1000 Brickell Avenue, Suite 300, Miami, FL 33131 as the street address of the initial registered office of the Company and names AGI Registered Agents, Inc. as the Company's initial registered agent at that address to accept service of process within this state.

**ARTICLE IV. DURATION AND CONTINUATION**

The period of the Company's duration shall commence with the filing of these Articles of Organization with the Secretary of State, and shall continue perpetually, unless terminated in accordance with the Company's Operating Agreement or pursuant to the Act, as amended from time to time.

**ARTICLE V. MANAGEMENT**

The Company shall be conducted, carried on, and managed by at least one (1) Manager and is, therefore, a manager-managed Company. The name and address of the initial person authorized to manage and control the Company is:

**Title**

**Name and Address:**

Manager

Garcia-Tunon, Manuel R.  
6945 Almansa Street  
Coral Gables, FL 33146

**ARTICLE VI. PURPOSE**

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida including activities within the United States and abroad.

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JUN -6 2014  
CLERK OF THE COURT  
CORAL GABLES, FL

**IN WITNESS WHEREOF**, the undersigned has hereunto set his hand and seal this 6<sup>th</sup> day of June 2024.

/s/ Robert R. Adams

\_\_\_\_\_  
Robert R. Adams,  
Duly Authorized Representative of the  
Member

## **ACCEPTANCE OF REGISTERED AGENT**

The undersigned agrees to act as registered agent for **MAGIS DEVELOPMENT, LLC** to accept service of process at the place designated in these Articles of Organization, and to comply with the provisions of Chapter 605, Florida Statutes, and acknowledges that the undersigned is familiar with, and accepts, the obligations of such position on this 6<sup>th</sup> day of June 2024.

AGI Registered Agents, Inc.

/s/ Robert Adams

\_\_\_\_\_  
Robert Adams, Authorized Person

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STATE  
SECRETARY

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