# Md000008771

(R	Requestor's Name)
(A	ddress)
<u> </u>	ddress)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
( <u>C</u>	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

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### COVERLETTER

TO:		istration Section sion of Corporations			t.	
<b>.</b>	-	Varana Clabal II C		*	Ŋ.	<b>A</b>
 UBJ	ECT:	Voyance Global, LLC				_
		Nam	e of Limited Liability Com	ipany		
		"Application by Foreign Limited Liability d check are submitted to register the above				
lease	return	all correspondence concerning this matter t	o the following:			
		Brian Saunders, Esq / c/o Harvey Sher	ifield			
			Name of Person			_
		Voyance Global, LLC				
			Firm/Company			_
		1100 Brickell Bay Drive, Unit 34:A				
			Address			_
		Miami, Florida 33131				
		C	City/State and Zip Code			_
		bsaundlaw@yahoo.com				
		E-mail address: (to be	e used for future annual rep	ort notification)	<del> </del>	<del></del>
≟or fu	rther in	formation concerning this matter, please ca	11:			
	Bria	n Saunders	213 3 at ( )	327-5383		
		Name of Contact Person	Area Code	Daytime Telepl	ione Number	-
		ling Address:	Street Address:			
Registration Section Division of Corporations P.O. Box 6327			Registration Secti			
		•	Division of Corp			
			The Centre of Ta			
	tan	lahassee, FL 32314	2415 N. Monroe Tallahassee, FL 3	•	0	
		osed is a check for the following amount:	A BTMENT (NE CTATE			
		se make check payable to: FLORIDA DEP 125.00 Filing Fee	e & 🛘 \$155.00 Filing		0.00 Filing Fee of Status & Ce	

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in Flori	ida. The alternate name must include "Limited	Liability Company," "L.L.C.	" or "LLC
Wyoming		85-2391931		
(Jurisdiction under the law of w	which foreign limited liability company is organized)	3. (FEI nui	mber, if applicable)	
October 1, 2020				
	(Date first transacted business in Florida, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine	gistration.) penalty liability)	<del></del>	
1100 Brickell Bay Dri		3603 Blue Avenue		
reet Address of Principal Office)		6. (Mailing Address)		
Unit 34:A		Gillette, Wyoming 82718		
Miami, FL 33131				
Name and street address	ss of Florida registered agent: (P.O. Box ]	NOT_acceptable)		
	Brian Saunders		100 (100 (100 (100 (100 (100 (100 (100	y
Name:				
Name: Office Address:	1100 Brickell Bay Drive, Unit 34:A			
		33131 , Florida(Zip code)	<u> </u>	 

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Seraphim Capital, LLC.	□Manager	Name: Brian Saunders
■Member	Address: 3603 Blue Avenue	□Member	Address: 7381 LaTijera Blvd
□Authorized	Gillette, Wyoming 82718	□Authorized	Box 45886
Person		Person	Los Angeles, CA 90045
□Other	Other	Other	Other
□Manager	Name: Land Fall Data, Inc.	□Manager	Name:
■Member	Address: 123 N.W. 13th St	□Member	Address:
□Authorized	Boca Raton, FL 33432	□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name: Harvey Sherifield (CEO)	□Manager	Name:
□Member	Address: 1100 Brickell Bay Drive	□Member	Address:
■Authorized	Unit 34:A	□Authorized	
Person	Miami, FL 3313t	Person	
□Other	Other	[]Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. 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.

Signature of an authorized person

Brian Saunders

Typed or printed name of signee



#### **Wyoming Secretary of State**

Herschler Bldg East, Ste.100 & 101

Cheyenne, WY 82002-0020 Ph. 307-777-7311

### For Office Use Only

WY Secretary of State

FILED: Aug 6 2020 5:36PM Original ID: 2020-000935495

# Limited Liability Company Articles of Organization

I. The name of the limited liability company is:

Voyance Global, LLC

II. The name and physical address of the registered agent of the limited liability company is:

Universal Registered Agents, Inc.

1507 Lampman Ct Cheyenne, WY 82007

III. The mailing address of the limited liability company is:

3603 Blue Avenue Gillette, Wyoming 82718

IV. The principal office address of the limited liability company is:

525 NW 1st Avenue Fort Lauderdale, Florida 33301

V. The organizer of the limited liability company is:

Brian Saunders 525 NW 1st Avenue, Fort Lauderdale, FL 33301

Signature:

Brian Saunders

Date: 08/06/2020

Print Name:

**Brian Saunders** 

Title:

Organizer-Counsel

Email:

bsaundlaw@yahoo.com

Daytime Phone #:

(213) 327-5383

### **Wyoming Secretary of State**



Daytime Phone #: (213) 327-5383

Herschler Bldg East, Ste.100 & 101

Cheyenne, WY 82002-0020 Ph. 307-777-7311

	n whose signature appears on the filing; that I am authorized to file these documents on behalf of the to which they pertain; and that the information I am submitting is true and correct to the best of my
	ecordance with the provisions of the Wyoming Limited Liability Company Act, (W.S. 17-29-101 through and Registered Offices and Agents Act (W.S. 17-28-101 through 17-28-111).
	nat the information submitted electronically by me will be used to generate Articles of Organization that h the Wyoming Secretary of State.
I intend and actifiling.	ree that the electronic submission of the information set forth herein constitutes my signature for this
☑ I have conduct	ted the appropriate name searches to ensure compliance with W.S. 17-16-401.
Notice	Regarding False Filings: Filing a false document could result in criminal penalty and prosecution pursuant to W.S. 6-5-308.
W.S. 6-5-	308. Penalty for filing false document.
of not mo	on commits a felony punishable by imprisonment for not more than two (2) years, a fine re than two thousand dollars (\$2,000.00), or both, if he files with the secretary of state ally or knowingly:
(i) Falsific	es, conceals or covers up by any trick, scheme or device a material fact;
(ii) Makes	any materially false, fictitious or fraudulent statement or representation; or
1 ' '	s or uses any false writing or document knowing the same to contain any materially tious or fraudulent statement or entry.
	having read W.S. 6-5-308.
Filer is: 🗸 Ar	n Individual
Filer Information By submitting the Organization.	<u>n:</u> his form I agree and accept this electronic filing as legal submission of my Articles of
Signature:	Brian Saunders Date: 08/06/2020
Print Name:	Brian Saunders
Title:	Organizer-Counsel
Email:	bsaundlaw@yahoo.com





Herschler Bldg East, Ste.100 & 101

Cheyenne, WY 82002-0020 Ph. 307-777-7311

### **Consent to Appointment by Registered Agent**

Universal Registered Agents, Inc., whose registered office is located at 1507 Lampman Ct, Cheyenne, WY 82007, voluntarily consented to serve as the registered agent for Voyance Global, LLC and has certified they are in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

I have obtained a signed and dated statement by the registered agent in which they voluntarily consent to appointment for this entity.

Signature:

Brian Saunders

Date: 08/06/2020

Print Name:

**Brian Saunders** 

Title:

Organizer-Counsel

Email:

bsaundlaw@yahoo.com

Daytime Phone #:

(213) 327-5383

## STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuance of this certificate have been fulfilled.

#### CERTIFICATE OF ORGANIZATION

Voyance Global, LLC

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this 6th day of August, 2020 at 5:36 PM.

Remainder intentionally left blank.



Filed Date: 08/06/2020

Secretary of State

Filed Online By:

**Brian Saunders** 

on 08/06/2020