F20000133

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer: Spore with Newell MICGIZO @ 12:27 pm Clark Fixing alternate Nour. She gove parmission To write it in					
(C) 2000 P3605					

Office Use Only



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T GLASS APR 0 9 2020



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2020

MABEL MALDONADO 2400 AUGUSTA DR SUITE 141 HOUSTON, TX 77057 US

SUBJECT: A & F SOLUTIONS, INC Ref. Number: W20000028605

We have received your document for A & F SOLUTIONS, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is P16000008602.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 020A00005949

9

RECEIVED
APR 0 9 2020

COVER LETTER

TO:	Registration Section Division of Corporations			
O1 115	A & F SOLUTIONS, INC			
SUB	JECT: Name o	of corporation	- must include suffix	
Dear	Sir or Madam:			
"Cert		of Good Stan	Authorization to Transact Business in Floring and check are submitted to registe ss in Florida.	
	e return all correspondence concerni EL MALDONADO	ng this matter	to the following:	
	 	Name of I	Person	
MAB	ELASSOCIATES, LLC			
		Firm/Com	pany	
2400	AUGUSTA DR SUITE 141		•	
		Addre	SS	
HOUS	STON, TEXAS 77057			<i>~</i>
		City/State ar	nd Zip code	
MAB	EL@MABELASSOCIATES.COM	•	·	?** :-
	E-mail address	: (to be used f	or future annual report notification)	
For further information concerning this matter, please call:				
For further information concerning this matter, piease can.				
MABEL MALDONADO		713	4197435	2:21
	Name of Person	Area Code	Daytime Telephone Number	_
	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclo	sed is a check for the following amo	ount:	1	
□ \$ 7	0.00 Filing Fee		\$78.75 Filing Fee & S87.50 Filing Certified Copy Certificate	of Status

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

A & F SOLUTE	A & F SOLUTIONS, INC						
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"					
	Dutions (Traip,						
TEXAS 2.	able in Florida, enter alternate corporate name	82-1968345					
(State or country)	y under the law of which it is incorporated) 5.	(FEI number, if application					
(Date	of incorporation)	(Date of duration, if other than	perpetual)				
7	, HOUSTON, TEXAS 77003	502, F.S., to determine penalty liability) oal office address)					
		ng address, if different)	202				
8. Name and stree	et address of Florida registered agent: (P.0 MARIAM QUINTANA	O. Box <u>NOT</u> acceptable)	0;9				
Office Address:	4458 Wyndcliff Court ORLANDO	32817	f.; 2: 2: 2				
	(City)	, Florida (Zip code)	<u></u>				

9. Registered agent's acceptance:

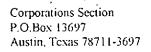
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRE	CCTORS
Chairman:	
Address:	
Vice Chai	rman:
_	
Director:	ABBY M SANCHEZ
Address:	1211 NAGLE ST
	HOUSTON, TEXAS 77003
Director:	LENNAR MATZEN
	1211 NAGLE ST
•	HOUSTON, TEXAS 77003
B. OFF	CERS
President:	
Address:	
	202
Vice Presi	dent:
	19
Secretary:	2:
Address:	-
Treasurer:	
Address:	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	Signature of Director or Officer
are true a a third de	Signature of Director of Officer er or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein nd that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S. Y SANCHEZ





Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for A&F SOLUTIONS, INC (file number 802747183), a Domestic For-Profit Corporation, was filed in this office on June 15, 2017.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: June 16, 2017

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 27, 2020.



Ruth R. Hughs
Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 950900260003