

L22000490144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

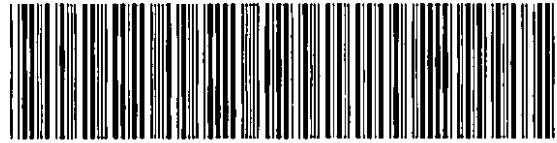
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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S. CHATHAM
NOV 18 2022

FILED
CLERK OF DISTRICT COURT
22 NOV 15 PM 1:19
ALLAHASSEE, FLORIDA

RECEIVED
2022 NOV 15 PM 2:16
ALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Affordabyte Investments LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel Marcus

Name of Person

Firm/Company

676 W Prospect Road

Address

Fort Lauderdale, Florida 33309

City/State and Zip Code

Jmarcusepa@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joel Marcus

954

566-8513

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO : Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 11/15/2022

PRIORITY Regular Approval

OUR REF. # (Order ID#) 1085324

ORDER ENTITY

AFFORDABYTE CONSULTING LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

AFFORDABYTE CONSULTING LLC (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$155.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "WJ" or similar, written over a horizontal line.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2022

INCSERV

SUBJECT: AFFORDABYTE CONSULTING LLC
Ref. Number: W22000143144

Please honor the
original submission date
as the file date. Thanks!!

We have received your document for AFFORDABYTE CONSULTING LLC.
However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or
it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from
the one presently on file.

The document number of the name conflict is P16000010240.

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

Summer Chatham
Regulatory Specialist II
New Filing Section

Letter Number: 122A00025526

RECEIVED

2022 NOV 17 AM 10:12

Please honor the
original submission date
as the file date. Thanks!!

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Affordable Investments LLC

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

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4560 SW 43rd Terrace
Fort Lauderdale, FL 33314

Mailing Address:

4560 SW 43rd Terrace
Fort Lauderdale, FL 33314

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Joel Marcus

Name

676 W Prospect Road

Florida street address (P.O. Box **NOT** acceptable)

Fort Lauderdale

Florida

33309

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.

Joel Marcus

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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DIVISION OF CORPORATIONS
22 NOV 15 PM 1:49

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Luis Garcia

4560 SW 43rd Terrace

Fort Lauderdale, FL 33314

AMBR

Ingrid Moreno

4560 SW 43rd Terrace

Fort Lauderdale, FL 33314

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STATE
DIVISION OF CORPORATION
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any:

Consulting and office start up

REQUIRED SIGNATURE:

L Garcia

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.

Luis Garcia

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)