M21000005396

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FILED

2022 APR 22 PM 6: 51

SEGRETARY OF STATE
TALLAMASSEE STATE

A. BUTLER MAY 11 2022

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: The Afficati Neth	NOVE LUC Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) a	are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
JOEY LEWIN	
Mane Sp. Carras pl.C. Firm/Company	-,
327 piaza real Soute 217	
BOCA LATON, FL 33432 City/State and Zip Code	
SERVICE © CSLAWFL. COM E-mail address: (to be used for future annual	report notification)
For further information concerning this matter,	please cail:
RUben Socayvas Name of Person	at (SUI) 609 3190 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following [IS25 Filing Fee S30 Filing Fee & Previously Provi Certificate of Status CR2E055 (9/15)	amount: ☐ \$55 Filing Fee & ☐ \$60 Filing Fee, Certified Copy Certified Copy Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE

2022 APR 22 PM 5:52

SECTION I (1-4 must be completed)
SECTION I (1-4 must be completed)
State: The Affiliati Network, UC
Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
2. The Florida document number of this limited liability company is: M21000005396
3. Jurisdiction of its organization:
4. Date authorized to do business in Florida: 5 5 2 2
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: (must contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6 If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent: Chane Socarras, PIC
New Registered Office Address: 327 plaza real Soite 217 Enter Florida Street Address
Boca Ruten Florida 33432 City Zip Code
New Registered Agent's Signature, if changing Registered Agent: 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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. If Changing Registered Agent, Signature of New Registered Agent

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:				
itle/ Capacity	Name	Address	Type of Actio	
			□ Remo	
			DAdd	
			□Remo	
			□Remo	
			□Remov	
	·	<u></u>	DAdd	
aforementioned amer	ate, if required: no more than 90 idment(s), duly authenticated by law of which this entity is orga	the official having custody of records	☐Remov	
		luce		
	Signature of	the authorized representative		

Filing Fee: \$25.00



Letter Number: 522A00008301

FLORIDA DEPARTMENT OF STATE Division of Corporations 2022 APR 22 AM 8: 04 SECRETARY OF STATE TALLAHASSEE, FL

April 10, 2022

RUBEN SOCARRAS 327 PLAZA REAL SUITE 217 BOCA RATON, FL 33432

SUBJECT: THE AFFILIATI NETWORK, LLC

Ref. Number: M21000005396

We have received your document for THE AFFILIATI NETWORK, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FOREIGN LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Anissa Butler Regulatory Specialist II

www.sunbiz.org

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Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "THE AFFILIATI NETWORK, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTIETH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE AFFILIATI NETWORK, LLC" WAS FORMED ON THE TWENTIETH DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

e at corn delaware gov/auth

Authentication: 203048783

Date: 03-30-22





RECEIVED

FLORIDA DEPARTMENT OF STATE Division of Carrent of State Division of Corporations

SECREMATIVE STATE TALLAHASSEE, FL

February 10, 2022

RUBEN SOCARRAS 327 PLAZA REAL SUITE 217 BOCA RATON, FL 33432

SUBJECT: THE AFFILIATI NETWORK, LLC

Ref. Number: M21000005396

We have received your document for THE AFFILIATI NETWORK, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU NEED TO SEND A CERTIFICATE OF GOOD STANDING FROM YOUR STATE.

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) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 222A00003313