P1300021120

(Requestor's Name)				
(Address)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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SECRETÁRY OF STATE
DIVISION OF CORPORATIONS
13 MAR -8 PM 1: 00

En 3/11/13

COVER LETTER

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

SUBJECT: Affluent Business Sol	ent Business Solutions, Inc.
· · · · · · · · · · · · · · · · · · ·	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00 □ \$78.75 Filing Fee Filing Fee

Filing Fee & Certificate of Status

\$78.75

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

ED () M	Alicia Yvonne Tucker-Marte				
KOM	Name (Printed or typed)				
	7210 NW 16th Ave.				
	Address				
	Miami, FL 33147				
	City, State & Zip				
	786-651-7501				
	Daytime Telephone number				
	affluentbusinessinc@gmail.com				
	E-mail address: (to be used for future annual report notification)				

NOTE: Please provide the original and one copy of the articles.

13 MAR -8 PH 1: 00

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	In compliance with Chapter 607 and	or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NA. The name of the corpora	ME Affluent Business		ETARY OF STATE N OF CORPORATIONS
ARTICLE II PR	INCIPAL OFFICE Principal street address	13 MA Mailing address, if d	R -8 PM 1: 00
7210 NW 16tl	· —	watting address, it di	incicia is.
Miami, FL-33	147		
	·		
The purpose for which	the corporation is organized is: Busines	ss Consultant Compar	<u> </u>
			
Ç			
ARTICLE IV SHA	<u> RES</u> . 100		
The number of shares of	stock is:		
	TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>	
Name and Title	Alicia Tucker-Marte, CEO	Name and Title:	<u> </u>
Address	7210 NW 16th Ave.	Address:	
	Miami, FL 33147		
Name and Title		Name and Title:	····
Address		Address:	
			
Name and Title		Name and Title:	
Address			
Addiess			
		. <u> </u>	

Address		_ Address:	
ARTICLE VI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o	f the registered age	nt is:
Name:	Alicia Y. Tucker-Marte	i ino registered age	· <u>2</u>
Address:	7210 NW 16th Ave.	•	SEC VISH
Address.	Miami, FL 33147	-	CRETAR SICN GE
ARTICLE VII	INCORPORATOR		CORPO CORPO PH
The name and ad	dress of the Incorporator is:		STATI ORATII
Name:	_Alicia Y. Tucker-Marte		ONS
Address:	7210 NW 16th Ave.		
•	Miami, FL 33147	·	
this certificate, I a	ed as registered agent to accept service of process of familiar with and accept the appointment as region of the service of process of familiar with and accept the appointment as region acceptance. Regulared Signature/Registered Agent when and affirm that the facts stated herein are repartment of State constitutes a third degree felong	istered agent and q	agree to act in this capacity 3/5/13 Date that the false information submitted in a
Juce	Required Signature/Incorporator		Vate

_ Name and Title:_

Name and Title: