## Division of Contract as COOO 67 7 Gage 1 of 2

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

129164

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S

FLORIDA PROFIT/NON PROFIT CORPORATION AFFORDABLE LAND INVESTMENTS, INC.

Certificate of Status	0
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N. SAMS

AUG 1 0 2017

## **COVER LETTER**

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

SUBJECT: Affordable Land Investments, INC.						
	(PROPOSED CORPORA)	re name – <u>must incl</u> i	UDE SUFFIX)			
Enclosed are an or	Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
\$70.00	_ + - · · ·	<b>⋬</b> \$78.75	\$87.50			
Filing Fee		Filing Fee	Filing Fee,			
	& Certificate of Status	& Certified Copy	Certified Copy			
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FROM: _	Wilner Pien	re				
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	2000	S AFROST				
		ddress				
MIAMI FLA 33136						
City, State & Zip						
03/ 500						
Daytime Telephone number						
Hon Wilner Pierre 16 @gnail, Con						
E-mail address: (to be used for future annual report notification)						

S.X.

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

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

ARTICLE I NAME  The name of the corporation	on shall be: Affordable	land Inves	thents, Inc.
ARTICLE II PRINCI	<u>PAI. OFFICE</u> rincipal <u>street</u> address	_	address, if different is:
730 NW	134 Dr.	730 6	1 W 184 DF.
	7(. 33136	MIAL	(1 FLA., 33132
ARTICLE III PURPOS	1		
Acq	vire Real Estate	<u> </u>	
		Nama and Tidas P	lup 15 IT
	780 NW 134 Dr.		
	MIAMI FL. 33136	<u> </u>	
Name and Title:		Name and Title:	
Address	<del></del> -	Address:	7
			NH 10G - 19
Name and Title:	·····	Name and Title:	
Address	<del></del>	Address:	<u> </u>
			<del></del>

Name and Title:		Name and Title:	
Address		Address:	
<del></del>			
ARTICLE VI REGISTERED AG		Cabu munistrand agant in	
Name: William Street Sudre	s Pierre	r tike registered agent is.	2
Address: 780 A	JW 184 Dr.	-	7 AUG
MIAL	11 FL, 33136	-	16-9 HASSE
ARTICLE VII INCORPORATOR	<u>t</u>		
The name and address of the Incorp	orator is:		3: 0 Form
Name:	Wilner Pierry	<u>•</u>	다. 5
Address:	DW 134 Dr	· <u>·</u>	
Mi	AMIFL, 3313	96	
ARTICIE VIII EFFECTIVE DA Effective date, if other than the date (If an effective date is listed, the date filing.)	of filing:	) . (OPTIONAL) it be more than five days pric	or or 90 days after the
Note: If the date inserted in this blo the document's effective date on the	ck does not meet the applicable Department of State's records.	statutory filing requirements, t	his date will not be listed as
Having been named as registered of this certificate, I am familiar with an	ent to accept service of process daccept the appointment as ref	s for the above stated corporat gistered agent and agree to act	ion at the place designated in in this capacity
Ywines &	1		8/9/17
	Signature/Registered Agent		Dale
I submit this document and affirm document to the Department of State	that the facts stated herein are constitutes a third degree felon	true. I um aware that the fals y as provided for in s.817.155,	e Information submitted in a F.S.
Required Signature/Incor	porator		Date

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