

Division of Corporations

P2400052075
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
MONTE GRUPO CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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

ARTICLE I NAME
The name of the corporation shall be: MONTE GRUPO CORP.

ARTICLE II PRINCIPAL OFFICE
Principal street address
9412 NW 120th ST #123
HIALEAH GARDENS, FL 33018
Mailing address, if different is:
9412 NW 120th ST #123
HIALEAH GARDENS, FL 33018

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: SHARES: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JORGE P. MONTESINO - P Name and Title:
Address 9412 NW 120th ST #123 Address:
HIALEAH GARDENS, FL 33018

Name and Title: Name and Title:
Address Address:

Name and Title: Name and Title:
Address Address:

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STATE

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: JORGE P. MONTESINO
Address: 9412 NW 120th ST #123
HIALEAH GARDENS, FL 33018

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: JORGE P. MONTESINO
Address: 9412 NW 120th ST #123
HIALEAH GARDENS, FL 33018

ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 days after the 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.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

/s/ Jorge P. Montesino 08/13/2024
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

/s/ Jorge P. Montesino 08/13/2024
Required Signature/Incorporator Date

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