# Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : CAPITAL CONNECTION, INC.

Account Number : I20000000257

Phone

: (850)224-8870

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: (850)222-1222

FLORIDA PROFIT CORPORATION OR P.A.

Monarch Leasing Limited Corp.

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N. Culligan OCT 2 - 2004

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# ARTICLES OF INCORPORATION

OF

#### Monarch Leasing Limited Corp.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I: NAME

The name of the corporation is Monarch Leasing Limited Corp.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 14 Montoya, Ft. Pierce, FL 34951.

#### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

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# ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is John Bruhn, 1109 Delaware Avenue, Ft. Pierce, FL 34950.

### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FI 32301.

# ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors of the corporation is John Hopkins, 14 Montoya, Ft. Pierce, FL 34951.

The undersigned has executed these Articles of Incorporation this 1st day of October 2001.

"Capital Connection, Inc. by Stacey Legget, Client Representative"

Stacey Leagett

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Fursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

ļ.	The name of the corpo	ratio	n is:	Monarc	h Leasing	y Limit	ed C	orp.
	The name and street	addres	s of	the re	gistered	agent	and	office
	1109 Delaware Avenue Ft. Pierce, FL 34950							

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

SECRETARY OF STATE
DIVISION OF CORPORATIONS