P12000025622

(Req	uestor's Name)	
(Addi	ress)	
(Addi	ress)	(av. 10 to 20 to 2
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		:
W12-	1267	7





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EXCURING OF STATE
FACILATIONS SEE FEMANIA

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COVER LETTER

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

SUBJECT: Montenegro's Corpora (PROPOSED CORPORA	oration '	
(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	la check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Cop & Certificate Status PPY REQUIRED
	e (Printed or typed)	
11031 N Kendall Dr	Apt R205 Address	
Miami, Florida, 3317 City,		sitti di Sese piser
(786) 304-0369 Daytime T	elephone number	
otto840513@yahoo E-mail address: (to be use	.es d for future annual report	notification)
NOTE: Please provide the o	riginal and one copy o	f the articles.
		• • :



March 5, 2012

OTTO SANCHEZ 11031 N KENDALL DR APT R205 MIAMI, FL 33176

SUBJECT: MONTENEGRO'S CORPORATION

Ref. Number: W12000012677

We have received your document for MONTENEGRO'S CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the name of the corporation in Article I.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator. We have received your document for MONTENEGRO'S CORPORATION and

the authorization to debit your account in the amount of \$87.50. However, the document has not been filed and is being returned for the following:

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

ARTICLE I NA The name of the corpor	AME ration shall be: Montenegro's	Cor	porat	noi					
ARTICLE II PRINCIPAL OFFICE Principal street address 11031 N Kendall Dr Apt R205 Miami, Florida, 33176			Mailing address, if different is: PO. Box 833419, Miami, Florida, 33283						
Any le	egal busines	S		,	RECHETARY OF STATE	12 MAR 14 PH 1: 53			
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRECTOR	Name	and Title:_ ss:						
Name and Title: Address:									
Name and Title: Address:		Name Addre	and Title:_ ss:					<u> </u>	
	egistered agent a street address (P.O. Box NOT acceptable) of Otto Sanchez _11031 N Kendall Dr Apt R205 _Miami, Florida, 33176	_	stered agent	t is:					
-	CORPORATOR S of the Incorporator is: Otto Sanchez 11031 N Kendall Dr Apt R205 Miami, Florida, 33176	- - -							
	ns registered agent to accept service of process miliar with and accept the appointment as region Required Signature/Registered Agent				n this cap	acity	designat		
	nt and affirm that the facts stated herein are rtment of State constitutes a third degree felong Refuured Signature/Incorporator					ation s	ubmitted 2012	l in a	