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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1/4

## COVER LETTER

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

SUBJECT: R. Monaleza Enterprises, 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  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM:

Ramona E. Bethke

Name (Printed or typed)

344 7th Street N, Apt. 3

Address

Saint Petersburg, FL 33701

City, State & Zip

727-793-8699

Daytime Telephone number

Rmonaleza@gmail.com

E-mail address: (to be used for future annual report notification)

**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 shall be: R. Monaleza Enterprises, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

344 7<sup>th</sup> Street N  
Apt 3  
Saint Petersburg, FL 33701

Same

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To provide public speaking, workshops, and writing services

**ARTICLE IV SHARES**

The number of shares of stock is: 6

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ramona E. Bethke

Name and Title: \_\_\_\_\_

Address: 344 7<sup>th</sup> Street N

Address: \_\_\_\_\_

Apt 3  
Saint Petersburg, FL 33701

Name and Title: Ramona E. Bethke

Name and Title: \_\_\_\_\_

Secretary  
Address: 344 7<sup>th</sup> Street N.

Address: \_\_\_\_\_

Apt 3  
Saint Petersburg FL 33701

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
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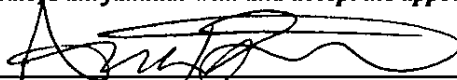
SECRETARY OF STATE  
TALLAHASSEE FLORIDA**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Amber E. Bethke  
 Address: 1234 47th Ave North  
St. Petersburg, FL 33703

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Ramona E. Bethke  
 Address: 344 7th Street N, Apt 3  
Saint Petersburg, FL 33701

*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*



Required Signature/Registered Agent

7/31/13

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.*



Required Signature/Incorporator

7/31/13

Date