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(F	Requestor's Name)	
(/	Address)	
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(0)	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	

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JEURE THAT OF STATE
FALL AHASSEE, FLORIDA

MARCH 14, 2018

FROM: JULIUS HEPBURN

TO: FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATION

RE: REINSTATEMENT OF "MONOAR MARKET, INC"

To Whom It May Concern:

I JULIUS HEPBURN IS WRITING THIS LETTER PRETAINING TO BUSINESS RENEW FEE "MONOAR MARKET, INC. I CAN NOT EFFORT THE CURRENT RENEWAL FEE ISSUED TO PAY FOR THE REINSTATEMENT OF "MONOAR MARKET, INC. I WOULD LIKE TO KEEP THE NAME & CONTINUE DOING BUSINESS AS "MONOAR MARKET INC, I CAN ONLY EFFORT TO PAY THE 70.00 FILLING FEE AT THIS MOMENT. PLEASE CONTACT ME IF YOU HAVE ANY QUESTION PERTENING THIS MATTER.

SINCERELY

JULIUS HEPBURN

us Heplum

954-7932101

COVER LETTER

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

SUBJECT: MONO	AR MARKET, INC		
SOBJECT:	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	d 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
		ADDITIONAL CO	
ىر FROM:	LIUS HEPBURN		
	Nam	e (Printed or typed)	
42:	50 1/2 NW 22nd AVE		
		Address	
MI	AMI, FLORIDA 33142		
	City	, State & Zip	
95	17932101		
	Daytime *	Telephone number	
ma	demen_noar@yahoo.com		
	E-mail address: (to be use	d 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 II PRI	NCIPAL OFFICE				
4250 1/2 NW 22nd /	Principal street address			Mailing address, if different is: NW 22nd AVE	
MIAMI, FL 33142				FL 33142	
		_			
A DOMESTIC LEAD IN CO.	PPOSE th the corporation is organized is:	ROCERY STORI	<u></u>	18	
				TAR N	I
				ASS 22	
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				ELOWIOA STATE	
				NO.	9
				 	
ARTICLE IV SHA	ARES 100 of stock is:				
The number of shares ARTICLE V INI	of stock is:		e and Title	JULIUS HEPBURN (P)	
The number of shares ARTICLE V INI	of stock is: TOO TIAL OFFICERS AND/OR DIRECT TITLE: JULIUS HEPBURN CEO 4250 1/2 NW 22nd AVE			4250 1/2 NW 22nd AVE	
The number of shares ARTICLE V INIT Name and T	of stock is:	Name			
The number of shares ARTICLE V INI Name and T Address	of stock is: TIAL OFFICERS AND/OR DIREC TITLE: JULIUS HEPBURN CEO 4250 1/2 NW 22nd AVE MIAMI, FL 33142	Name	ess:	4250 1/2 NW 22nd AVE MIAMI, FL 33142	
The number of shares ARTICLE V INI Name and T Address	of stock is: TIAL OFFICERS AND/OR DIRECT TI	Name	ess: e and Tit l e	4250 1/2 NW 22nd AVE MIAMI, FL 33142	
The number of shares ARTICLE V INT Name and T Address Name and Ti	of stock is: TIAL OFFICERS AND/OR DIRECT TITLE: JULIUS HEPBURN CEO 4250 1/2 NW 22nd AVE MIAMI, FL 33142 ttle: JULIUS HEPBURN (S)	Name	ess: e and Tit l e	4250 1/2 NW 22nd AVE MIAMI, FL 33142 JULIUS HEPBURN (T)	
The number of shares ARTICLE V INT Name and T Address Name and Ti	of stock is: TIAL OFFICERS AND/OR DIRECT TITLE: JULIUS HEPBURN CEO 4250 1/2 NW 22nd AVE MIAMI, FL 33142 tte: JULIUS HEPBURN (S) 4250 1/2 NW 22nd AVE	Name	ess: e and Tit l e	4250 1/2 NW 22nd AVE MIAMI, FL 33142 JULIUS HEPBURN (T) 4250 1/2 NW 22nd AVE	
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Name ar	nd Title:	Name and Title:	
Address		Address:	
			
	REGISTERED AGENT		
The name and F	Iorida street address (P.O. Box NOT accepta JULIUS HEPBURN	ole) of the registered agent is:	
Name:	4250 1/2 NW 22nd AVE		
Address:		18 MAK ZZ ALLAHASS	
	MIAMI, FL 33142	AASSE	>
ARTICLE VII	INCORPORATOR	رن ⊏ ⊐	2
	ddress of the Incorporator is:	FLORIDA FLORIDA	ာ က
Name:	JULIUS HEPBURN	AQN S	٥
Address:	4250 1/2 NW 22nd AVE		
Address;	MIAMI, FL 33142		
			
	EFFECTIVE DATE: 03/14/2018 Other than the date of filing:	(OPTIONAL)	
		annot be more than five days prior or 90 days after	the
-	a November 1 Control C		
	e inserted in this block does not meet the applied in the Department of State's rec	cable statutory filing requirements, this date will not be ords.	liste
Haxina been na	med as revistered agent to accept service of p	rocess for the above stated corporation at the place de	rices
this certificate, I	am familiar with and accept the appointment	as registered agent and agree to act in this capacity	ngnu
	Required Signature/Registered Ager	03/14/2018	
I submit this document to the	cument and affirm that the facts stated herei Department of State constitutes a third degree	n are true. I am aware that the false information sub- felony as provided for in s.817.155, F.S.	mitte
	ulu Henler ired Signature/Incorporator		
Retu	ired Signature/Incorporator	Date	