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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

MONARCH INTERNATIONAL GROUP,	
INC.	
IIVC.	\dashv
	A
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: Seth	UCC 1 or 3 File
08/17/18	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

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

SUBJECT: MONA	RCH INTERNATIONAL GROUP, I	INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	& Certificate of Status
	ADDITIONAL COPY R		PY REQUIRED
FROM:		e (Printed or typed)	
_		Address	
FO	RT PIERCE, FLORIDA 34951		
	City,	State & Zip	
772	2-519-0444		
	Daytime 1	Celephone number	
bat	alini@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)

RTICLE II PRING	TIPAL OFFICE Principal street address	j	Mailing address, if different is:
7328 COMMERCIAL	CIRCLE	SAME	
FORT PIERCE, FLOR	IDA 34951		
ARTICLE III PURP The purpose for which	OSE he corporation is organized is:		
SALES AND DISTRI	BUTION OF PRODUCTS FOR EXPORT	AND DOMESTIC	CONSUMPTION
			TALL WHASSEF, FLORID
ARTICLE IV SHAR The number of shares of			
The number of shares of	stock is: AL OFFICERS AND/OR DIRECTORS LAMES E RATALINI PRESIDENT	Norma and Tide	IAMES F BATALINI SECRETARY
The number of shares of ARTICLE V INITL Name and Titl	stock is: AL OFFICERS AND/OR DIRECTORS LAMES E RATALINI PRESIDENT	Name and Title	IAMES F BATALINI SECRETARY
The number of shares of	stock is: AL OFFICERS AND/OR DIRECTORS E. JAMES F. BATALINI PRESIDENT	Name and Title Address:	JAMES F. BATALINI SECRETARY
The number of shares of ARTICLE V INITE Name and Titl Address	stock is: AL OFFICERS AND/OR DIRECTORS JAMES F. BATALINI PRESIDENT 7328 COMMERCIAL CIRCLE	Address: Name and Title	JAMES F. BATALINI SECRETARY 7328 COMMERCIAL CIRCLE FORT PIERCE, FLORIDA 34951
The number of shares of ARTICLE V INITL Name and Titl Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS JAMES F. BATALINI PRESIDENT 7328 COMMERCIAL CIRCLE FORT PIERCE, FLORIDA 34951	Address: Name and Title Address:	JAMES F. BATALINI SECRETARY 7328 COMMERCIAL CIRCLE FORT PIERCE, FLORIDA 34951

Name ar	nd Title:	Name and Title:		
Address	s	Address:		
	<u>REGISTERED AGENT</u> Torida street address (P.O. Box NOT acceptable	of the registered paper is:		
Name:	JAMES F. BATALINI	of the registered agent is.		
Address:	7328 COMMERCIAL CIRCLE			
	FORT PIERCE, FLORIDA 34951	· ·		
ARTICLE VII	<u>INCORPORATOR</u>		18 AUG SECNEL SHALL AHA	
The name and a	ddress of the Incorporator is:		6 17 8 17	
Name:	JAMES F. BATALINI			
Address:	7328 COMMERCIAL CIRCLE		AH 9: 48 OF STATE	
	FORT PIERCE, FLORIDA 34951		RIDA PACE &	
Effective date, if (If an effective of filing.) Note: If the date	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and can e inserted in this block does not meet the applicate effective date on the Department of State's record	not be more than five days ble statutory filing requireme.	prior or 90 days after the	
Having been na this certificate A	med as registered agent to accept service of proc am familiar with and accept the appointment as	ess for the above stated corp registered agent and agree to	poration at the place designated in to act in this capacity AUGUST 15, 2018	
Required Signature/Registered Agen			Date	
I submit this do	cument and affirm that the facts stated herein a	re true. I am aware that the	false information submitted in a	
The state of the s	Department of State constitutes a third degree fel	ony as providea for in s.817. ———	155, F.S. AUGUST 15, 2018	
Kequ	ited Signature/Incorporator		Date	