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Florida Department of State
Division of Corporations
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA PROFIT/NON PROFIT CORPORATION
MONTECO, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I NAME

The name of the corporation shall be: MONTECO, INC

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

7875 NW 107 AVE UNIT 2067875 NW 107 AVE UNIT 206DORAL, FL 33178DORAL, FL 33178**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: P: MIGUEL A. MONTENEGRO V.

Name and Title: _____

Address 7875 NW 107 AVE.

Address: _____

UNIT: 206DORAL, FL 33178

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MIGUEL A. MONTENEGRO V.
 Address: 7875 NW 107 AVE UNIT 206
DORAL, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MIGUEL A. MONTENEGRO V.
 Address: 7875 NW 107 AVE UNIT 206
DORAL, FL 33178

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 07/13/2020. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X Miguel Montenegro
 Required Signature/Registered Agent

07/13/2020

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.

X Miguel Montenegro
 Required Signature/Incorporator

07/13/2020

Date

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 SECRETARY OF STATE
 TALLAHASSEE, FL

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