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Division of State
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CALVINO & ASSOCIATES INC
Account Number : I20200000065
Phone : (305)909-2099
Fax Number : (305)909-1328

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: INFO@CALVINOTAXPRO.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
MONTERO'S G&G INC

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

Derrick Thompson

12/15/2020

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: MONTERO'S G&G INC**ARTICLE II PRINCIPAL OFFICE**Principal street address3640 E 4TH AVE. UNIT 108HIALEAH, FL 33013

Mailing address, if different is:

320 E 38TH STHIALEAH, FL 33013**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: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: LISVEL ZOLAYA MONTERO- (PRESIDENT) Name and Title: _____Address 3640 E 4TH AVE,

Address: _____

UNIT 108HIALEAH, FL 33013

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: CALVINO & ASSOCIATES INC
 Address: 13590 SW 134 AVE, SUITE 211
MIAMI FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOHANNA PENA
 Address: 13590 SW 134 AVE, SUITE 211
MIAMI, FL 33186

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 12/15/2020. (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

 Required Signature/Registered Agent

12/15/20
 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

12/15/20
 Date