

From: Robert Fanjul
10/5/21, 8:13 AM

Fax: (850) 617-6381

To:

Fax: (850) 617-6381

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10/05/2021 8:16 AM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FANJUL ENTERPRISES LLC

Account Number : I20190000080

Phone : (305)603-8791

Fax Number : (877)503-6086

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
MONTOYA CAPITAL INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: MONTOYA CAPITAL INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

13521 NW 4TH ST APT 101PEMBROKE PINES, FL 33028**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CHRISTIAN MONTOYA ALBARRACIN-P

Name and Title: _____

Address 13521 NW 4TH ST APT 101

Address: _____

PEMBROKE PINES, FL 33028

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

Name: CHRISTIAN MONTOYA ALBARRACIN

Address: 13521 NW 4TH ST APT 101

PEMBROKE PINES, FL 33028

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: CHRISTIAN MONTOYA ALBARRACIN

Address: 13521 NW 4TH ST APT 101

PEMBROKE PINES, FL 33028

2021 OCT -5 PM 1:41
SUN 10/05/2021**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: _____ (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 Christian Montoya

Required Signature/Registered Agent

x 07/22/2021

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 Christian Montoya

Required Signature/Incorporator

x 07/22/2021

Date