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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

12/22/21

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 12000000019
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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.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
MONA CONSULTING, INC.**

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: MONA CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2212 SW 22 Ave.
Miami, FL 33145

Mailing address, if different is:
Same as principal street address

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 DIRECTORS

Name and Title: Irene Zingg, PSTD Name and Title: _____

Address 60 Edgewater Dr., Unit 3H Address: _____
Coral Gables, FL 33133

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: Irene Zingg
 Address: 60 Edgewater Dr., Unit 3H
Coral Gables, FL 33133

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Irene Zingg
 Address: 60 Edgewater Dr., Unit 3H
Miami, FL 33133

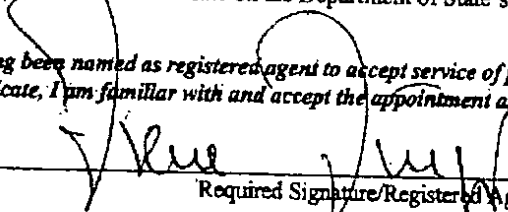
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

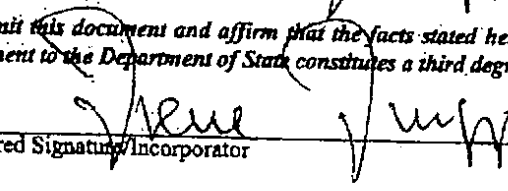
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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:

✓  _____
 Required Signature/Registered Agent Date 12-17-21

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 Date 12-17-21

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