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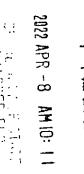
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A. RAMSEY APR 1 1 2022

. COVER LETTER

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

SUBJECT: MC	NTY HOUSING SOLUTIONS	S, INC	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
⅓ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Gilberto Montelongo Jr Nam	e (Printed or typed)	
<u>PC</u>) Box 1240	····	
		Address	
Z	ephyrhills, Fl 33539	C 9 7:	
	City,	State & Zip	
3:	52-424-4968		
	Daytime T	elephone number	
gr	nonty38@yahoo.com		
	E-mail address: (to be use	d for future annual report r	iotification)

NOTE: Please provide the original and one copy of the articles.

Florida Department of State Division of Corporations

Amendment Section P.O. Box 6327 Tallahassee, FL 32314

Attention: Annette Ramsey

Subject: Monty Housing Solutions, Inc

Ref #: N19000001530 Letter #: 222A00005067

To Whom It May Concern,

I, Gilberto Montelongo, Jr, will not be revoking the dissolution of the non-profit corporation Monty Housing Solutions, Inc and I am releasing the name to be used for the formation of the profit corporation Monty Housing Solutions, Inc.

Thank you

Gilberto Montelongo, Jr.

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

ARTICLE I NAME	tion shall be: MONTY HOUSING SOLU	TIONS INC	
The name of the corpora	tion shall be: WORTT HOUSING SOLE		2022 APR -8 AMIO: 11
ARTICLE II PRINC	CIPAL OFFICE		An IU:
3608 Allen Rd	Principal street address	Mai	ling address, if different is:
Zephyrhills, FL 33541		Zephyrhills, I	FL 33539
zephymms, i b 330 i i		<u> </u>	
ADDICE DE DESTRUCCIONES	aer		
The purpose for which t	he corporation is organized is: Building	new constructions hom	es within the community and also
	operties to rehabilitate and sell for a pro		
purchasing distressed pr	operties to remadificate and sen for a pro		
· · · · · · · · · · · · · · · · · · ·		-	-
-		<u> </u>	
ARTICLE IV SHARI	ES .		
The number of shares of			
ARTICLE V <u>INITIA</u>	L OFFICERS AND/OR DIRECTORS		
Name and Title	Gilberto Montelongo, Jr - Title: P	Name and Title:	<u> </u>
Address	PO Box 1240	Address:	
71001000			
	Zephyrhills, FL 33539		
		_	
1 671 1		No. 1 a mile.	
Name and Title:		Name and Title:	
Address		Address:	
	-		
Name and Title:		Name and Title:	
Address		Address:	
Address			

	nd Title:	Name and Title:
Addres	s	Address:
ARTICLE VI	REGISTERED AGENT	
The <u>name and F</u>	lorida street address (P.O. Box NOT acc	eptable) of the registered agent is:
Name:	Gilberto Montelongo Jr	
Address:	3608 Allen Rd	
	Zephyrhills, FL 33541	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	Gilberto Montelongo Jr	
Address:	PO Box 1240	
	Zephyrhills, FL 33539	
ARTICLE VIII Effective date if	EFFECTIVE DATE: other than the date of filing: 4/1/2022	. (OPTIONAL)
Are se a	date is listed, the date must be specific a	and cannot be more than five days prior or 90 days after th
		man and the second seco
filing.)		applicable statutory filing requirements, this date will not be li-
filing.) Note: If the date	ffective date on the Department of State'	
Note: If the date the document's of	·	's records.
Note: If the date the document's of the Having been not	ned as registered agent to accept service of	's records.
Note: If the date the document's of the Having been not	ned as registered agent to accept service of	's records. If process for the above stated corporation at the place designate as registered agent and agree to act in this capacity
Note: If the date the document's of the Having been not	ned as registered agent to accept service of	's records. If process for the above stated corporation at the place designates as registered agent and agree to act in this capacity
Note: If the date the document's of the document's document of the document's document of the document's document of the document's docume	ned as registered agent to accept service of familiar with and accept the appointment of Required Signature/Registered Accument and affirm that the facts stated h	's records. If process for the above stated corporation at the place designate as registered agent and agree to act in this capacity - 4-2022