

P24000044099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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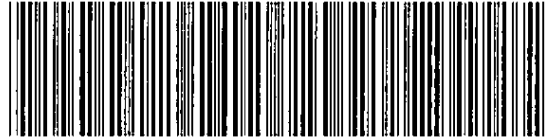
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 07/01/2024
Acc#120160000072

W: C D W

Name:	Monarca Corp.
Document #:	
Order #:	15728173

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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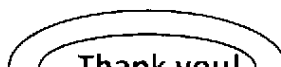
Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
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Document _____
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Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **78.75**



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: Monarca Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10805 NW 100TH STREET

Suite 1

Miami, FL 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful act or activity for which corporations
may be organized under the Florida Business Corporation Act

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JORGE D. GONZALEZ, Director

Name and Title: _____

Address 12300 NW 6th Street

Address: _____

Plantation, FL 33225

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FL

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: C T Corporation System

Address: 1200 South Pine Island Road Plantation,

FL 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Tacori Collins

Address: 77 W. Wacker Dr., Suite 3100

Chicago, IL 60601

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DEPARTMENT OF STATE

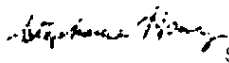
ARTICLE VIII EFFECTIVE DATE:

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

By: C T Corporation System  Stephanie Hencz, Assistant Secretary July 1, 2024
Required Signature/Registered Agent 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.

 July 1, 2024
Required Signature/Incorporator Date