

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
P2300009722036

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((H2300009722036))



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To:

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

From:

Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : 120180000033
Phone : (305)805-3516
Fax Number : (305)887-5844

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

Email Address: TBS-123456@456789.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
MONITOR DOLLAR PAY INC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

2023 MAR 14 PM 11:51
DIVISION OF STATE
TALLAHASSEE, FL

FILED

DS

Mar. 14. 2023 1:11PM

No. 7383
11250406722002

COVER LETTER

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

SUBJECT: Monitor Dollar Pay Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$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 COPY REQUIRED

FROM:

Gordenis Calixte

Name (Printed or typed)

8500 NW 30th Ter

Address

Doral, FL 33122

City, State & Zip

954 937 3012

Daytime Telephone number

TBS.DORAL@gmail.com

E-mail address: (to be used for future annual report notification)

DEPARTMENT OF STATE
TALLAHASSEE, FL

2023 MAR 14 PM 1:51

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

Mar. 14. 2023 1:12 PM

FW 4.10.7388-797 3.1.2

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:

Monitor Dollar Pay Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
16450 NW 2nd Ave, Apt 106
Miami, FL 33169

Mailing address, if different is:
16450 NW 2nd Ave, Apt 106
Miami, FL 33169

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:

(P) JARROD GRACIA

Address:

16450 NW 2nd Ave

Apt 106

Miami, FL 33169

Name and Title:

(VP) Yordens O

Address:

8500 NW 30th

Doral, FL 33122

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

2023 MAR 14 PM 1:12
FILED
TALLAHASSEE
FL 32302

Mar 14 2023 1:12 PM

FILED
MAR 14 2023
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: Yordanis Calixte

Address: 8500 NW 30TH TER

Doral, FL 33122

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Yordanis Calixte

Address: 8500 NW 30TH TER

Doral, FL 33122

ARTICLE VIII EFFECTIVE DATE

Effective date, if other than the date of filing: 12/14/2023 (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

[Signature]
Required Signature/Registered Agent

03/14/2023
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.

[Signature]
Required Signature/Incorporator

03/14/2023
Date