F100000004648

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
•					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
No copy.					





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10/21/10--01028--019 **800.00

03/15/10--01026--004 **210.00

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SECRETARY OF STATE

10/22/600

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Central Florida Express Inc.	
Name of corporat	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation to "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	tanding" and check are submitted to register the
Please return all correspondence concerning this ma	tter to the following:
Isaac Manzo	
Name	of Person
Manzo & Associates, P.A.	
Firm/C	Company
4767 New Broad Street	
Ac	Idress
Orlando, FL 32814	
City/Stat	e and Zip code
Manzo@lawyer.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, please	se call:
Isaac Manzo at (407) 514-2692
Name of Person Are	ea Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
☑ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 16, 2010

ISAAC MANZO 4767 NEW BROAD STREET ORLANDO, FL 32814

SUBJECT: CENTRAL FLORIDA EXPRESS INC.

Ref. Number: W10000043553

We have received your document for CENTRAL FLORIDA EXPRESS INC. and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$800.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 210A00022039

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

				RATUTES, THE FOLLOWING IS SUBMIT BUSINESS IN THE STATE OF FLORIDA.	TEB TO	
1	Central Florida	Express Inc.				=
••		orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")	D,	" "COMPANY," "CORPORATION,"	SSE 04	1 07
					· 100	.5
	(If name unavaila	able in Florida, enter alternate corporate nam	ne	adopted for the purpose of transacting business	in Elorida)	بر ئ
2.	Indiana	3	3.	26-2505395		_
	State or country	under the law of which it is incorporated)		(FEI number, if applicable)		
4.	4/27/2008	5	5.	Perpetual		_
	(Date	of incorporation)		(Duration: Year corp. will cease to exist or "]	perpetual")	_
6.	July, 2008					
7	10748 Sky Prair	(SEE SECTIONS 607.1501 & 607. ie Street Fishers, IN 46038	.15	n Florida, if prior to registration) 602, F.S., to determine penalty liability)		_
		(Principal office ac	ddı	ress)		
-	10748 Sky Prai	rie Street Fishers, IN 46038	.د د		 	_
8.	Any and all law (Purpose(s	(Current mailing action of the components of the corporation authorized in home state or				_
9.	Name and stree	et address of Florida registered agent: (P	O.	. Box NOT acceptable)		
	Name:	Manzo & Associates, P.A.		<u></u>		
Of	fice Address:	4767 New Broad Street		<u></u>		
		Orlando		, Florida 32814		
		(City)		(Zip code)		

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	119
Address:	
Director: R. Todd Garey	
Address: 10748 Sky Prairie Street Fishers, IN 46038	
Director: Chris Nantista	
Address: 10748 Sky Prairie Street Fishers, IN 46038	
B. OFFICERS	
President:	
Address:	
Vice President:	
Address:	<u> </u>
Secretary:	
Address:	
Freasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	s and/or directors.
(Signature of Director or Officer listed in number 12 of the application)	
14. R. Todd Garey	
(Typed or printed name and capacity of person signing application)	

• STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

SECRETARY OF STATE TALLAHASSEE FLORIDA

To Whom These Presents Come, Greetings:

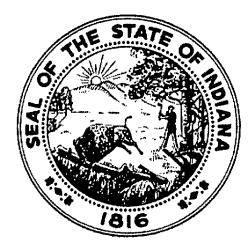
1, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

CENTRAL FLORIDA EXPRESS INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on April 28, 2008, and was in existence or authorized to transact business in the State of Indiana on August 13, 2010.

I further certify this For-Profit Domestic Corporation has not filed its most recent report required by Indiana law with the Secretary of State and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Thirteenth Day of August, 2010.

TODD ROKITA, Secretary of State

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