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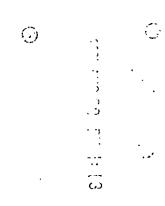
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

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COVER LETTER

TO:	Registration Section Division of Corporations					
SHRIF	YANWEN EXPRESS LLC					
50,000		of Limited Liability Company				
The enc Existen	closed "Application by Foreign Limited Liability Coce, and check are submitted to register the above re	ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida.				
Please r	eturn all correspondence concerning this matter to	the following:				
	Sheng Huang					
		Name of Person				
	IAN Financial Group					
	Firm/Company					
	15335 Fairfield Ranch Road Suite 200					
		Address				
	Chino Hills. California, 91709					
	Cit	y/State and Zip Code				
	team@ianfg.com					
	E-mail address: (to be u	used for future annual report notification)				
For furt	her information concerning this matter, please call:					
Sheng Huang		1 213-316-6586 at ()				
	Name of Contact Person	at () 213-316-6586 Area Code Daytime Telephone Number				
Mailing Address:		Street Address:				
Registration Section		Registration Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPA \$125.00 Filing Fee Certificate of	ARTMENT OF STATE & □ \$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate				

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida. The alternate name	must include "Limited Lia	bility Company,"	"L.L C," or "L	
Delaware		84-3949				
(Jurisdiction under the law of w	hich foreign lumited liability company is organized)	3	(FEI number, if applicable)			
-	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration) ne penalty liability)				
8 The Green STE A		6. (Maile	ng Address)			
Dover						
DE 19901						
	ss of Florida registered agent; (P.O. Box	NOT acceptable)	0		
	ss of Florida registered agent: (P.O. Box Registered Agents Inc)	9	6000000	
Name and street address	Registered Agents Inc)	9	٠.۶	
Name and street address Name:	Registered Agents Inc 7901 4th St N STE 300		33702 lorida		٠.۶	

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.



8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Title or Capacity: Name and Address: Name and Address: WENXING ZHOU Name: Name: Yanwen Logistics Inc □Manager □Manager 8 The Green STE A 200 Continental Drive Suite 401 Address: ■ Member □ Member Address: Office 434 Dover □ Authorized Authorized Newark DE 19713 DE 19901 Person Person □Other____ □Other_ Other____ □Other__ Manager Address: □Member Address: □Member □ Authorized □ Authorized Person Person Other □Other □Other__ Other____ Name: Name: □Manager □Manager Address: _____ ☐ Member Address: □Member □ Authorized □ Authorized Person Person Other____ Other □Other _____ □Other____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any 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. WENXING ZHOU Signature of an authorized person

Typed or printed name of signee

WENXING ZHOU

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "YANWEN EXPRESS LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SIXTH DAY OF AUGUST, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "YANWEN EXPRESS LLC" WAS FORMED ON THE TENTH DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

at corp.delaware.gov/auti

Authentication: 204093001

Date: 08-06-24