

PO6000134088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

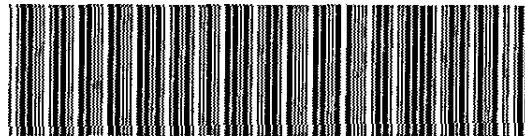
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT 23 PM 1:41

B. McKnight OCT 23 2006

COVER LETTER

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

SUBJECT: EXPRESS 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: BOBBIE ANN SCOTTO

Name (Printed or typed)

31 EVANSVILLE LANE

Address

PALM COAST, FLORIDA 32164

City, State & Zip

(386) 437-9208

Daytime Telephone number

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

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:

EXPRESS PAY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

31 EVANSVILLE LANE, PALM COAST, FLORIDA 32164

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO DO ANY AND ALL BUSINESS, IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

BOBBI ANN SCOTTO - PRESIDENT
31 EVANSVILLE LANE
PALM COAST, FL 32164**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:BOBBI ANN SCOTTO
31 EVANSVILLE LANE
PALM COAST, FL 32164**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:BOBBI ANN SCOTTO
31 EVANSVILLE LANE
PALM COAST, FL 32164

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

Bobbi Ann Scotto

Signature/Registered Agent

10/19/06

Date

Bobbi Ann Scotto

Signature/Incorporator

10/19/06

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT 23 PM 1:42