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



600145107906

03/06/09--01013--016 **78.75

COVER LETTER

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

| SUBJECT: Flat Fee | Courier Inc. (PROPOSED CORPOR | ATE NAME – <u>MUST INCI</u> | LUDE SUFFIX) |
|----------------------|--|-----------------------------|---|
| | | | |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | a check for: |
| \$70.00 Filing Fee | □ \$78.75 Filing Fee & Certificate of Status | | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| FROM: Ma | rta Elida Fulgueira Name | (Printed or typed) | |
| | 17452 SW 79 Place | Address | |
| | Palmetto Bay, Florida 33157 City | , State & Zip | |
| | 786-402-4981 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:

Flat Fee Courier Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 17452 SW 79 Place

Palmetto Bay, Florida 33157

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:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Marta Elida Eulgueira 17452 SW 79 Place

Palmetto Bay, Florida 33157

President, Secretary, Treasurer, and Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Marta Elida Fulgueira 17452 SW 79 Place Palmetto Bay, Florida 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Marta Elida Fulgueira 17452 SW 79 Place Palmetto Bay, Florida 33157

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

103-04-

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Date