

P09000044487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

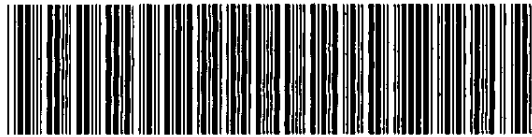
(Document Number)

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W09-18985



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FILED

2009 MAY 19 PM 4:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Bureh MAY 20 2009

COVER LETTER

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

SUBJECT: NOVAJ EXPRESS 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: JAVON W. CHARLTON
Name (Printed or typed)

504 CARRILLON AVE. SOUTH
Address

LEHIGH ACRES, FL 33974
City, State & Zip

(239) 839 - 4830
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2009

JAVON W. CHARLTON
504 CARRILLON AVE SOUTH
LEHIGH ACRES, FL 33974

SUBJECT: NOVAJ EXPRESS INC.
Ref. Number: W09000018985

We have received your document for NOVAJ EXPRESS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of 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
New Filing Section

Letter Number: 309A00013572

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:

NOVA J EXPRESS INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

504 CARRILLON AVE. SOUTH
LEHIGH ACRES, FL. 33974

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRUCKING

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):

JAVON W. CHARLTON
504 CARRILLON AVE. SOUTH PRESIDENT
LEHIGH ACRES, FL. 33974

ARTICLE VI REGISTERED AGENT

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

JAVON W. CHARLTON
504 CARRILLON AVE. SOUTH
LEHIGH ACRES, FL. 33974

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAVON W. CHARLTON
504 CARRILLON AVE. SOUTH
LEHIGH ACRES, FL. 33974

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/Registered Agent



Signature/Incorporator

FILED
2009 MAY 19 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/14/09

Date

5/14/09

Date