

P090000064811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

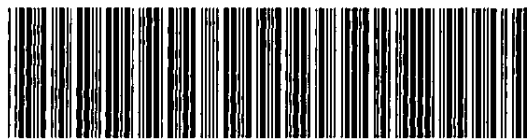
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/29/09--01014--014 **70.00

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09 JUL 30 AM 10:12
CLERK OF STATE
TALLAHASSEE, FLORIDA

W09-20402

B. McKnight JUL 31 2009

COVER LETTER

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

SUBJECT: Coneccion 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 ☐ \$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: Coneccion Express Inc.

Name (Printed or typed)

2120 S.W. 6 Street, Unit 10

Address

Miami, FL 33135

City, State & Zip

(305) 508-0706

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 30, 2009

CONECCION EXPRESS INC.
2120 SW 6 STREET UNIT 10
MIAMI, FL 33135

SUBJECT: CONECCION EXPRESS INC.
Ref. Number: W09000020402

We have received your document for CONECCION EXPRESS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

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) 245-6931.

Becky McKnight
Regulatory Specialist II
New Filing Section

Letter Number: 209A00014631

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:

Coneccion Express Inc.

ARTICLE II PRINCIPAL OFFICE

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

2120 S. W. 6 Street, Unit 10, Miami, FL 33135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Delivery and Moving Services

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred (100) Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mario E. Pineiro
2120 S. W. 6 Street
Unit 10
Miami, Florida 33135

ARTICLE VI REGISTERED AGENT

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

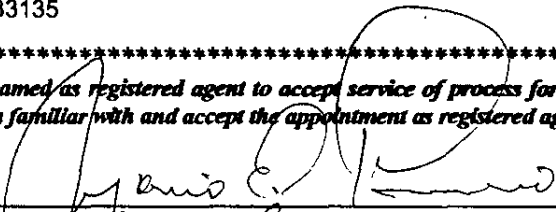
Mario E. Pineiro
2120 S. W. 6 Street
Unit 10
Miami, Florida 33135

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mario E. Pineiro
2120 S. W. 6 Street
Unit 10
Miami, Florida 33135

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

April 25, 2009

Date

M.P.


Signature/Incorporator

April 25, 2009

Date



SIGNATURE/INCORPORATOR

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CLERK OF STATE
TALLAHASSEE, FLORIDA