

P11000023384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAR -8 PM 2:01

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JE/DOE 2/31

COVER LETTER

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

SUBJECT: Warren Express Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and check for:

☐

\$70.00
Filing Fee

☒

\$78.75
Filing Fees &
Certificate of Status

☐

\$78.75
Filing Fee
& Certified Copy

☐

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

ADDITIONAL COPY REQUIRED

FROM:

Charles Warren

Name (Printed or typed)

18577 Minnesota Ave

Address

Jacksonville, FL 32234

City, State & Zip

386 752 4576

Daytime Telephone number

diehardchief58@yahoo.com

Email Address: (to be used for future annual report notification)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Division of Corporations
Tallahassee Florida

November 3, 2010

To Whom It May Concern:

I am requesting that my corporation name of Warren Express Inc
Be released and I do not retain the name effective immediately.

This is a unanimous choice by the stockholders.

Thank you,

Charles Warner

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Warren Express Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

mailing address, if different is:

18577 Minnesota Ave
Jacksonville FL 32234

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:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTIONS

Name and Title:

Address:

Pres Charles Warren
18577 Minnesota Ave
Jacksonville, FL 32234

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI REGISTERED AGENT

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

Name:

Address:

Charles Warren
18577 Minnesota Ave
Jacksonville, FL 32234

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

NETTIE DAVIS, INC.

846 S.W. Main Blvd.

Lake City, FL 32025

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

Charles Warren

Required Signature/Registered Agent

3/5/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Nettie Davis

Required Signature/Incorporator

3/5/11

Date