

P1100 8024006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

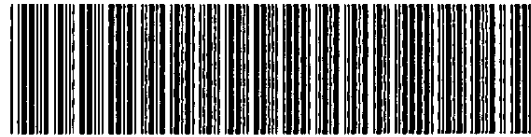
(Document Number)

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TALLAHASSEE, FLORIDA

J. Shivers MAR 11 2011

W11-5755
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COVER LETTER

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

SUBJECT: L.O. 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: LUKASZ OSIROWICZ
Name (Printed or typed)
135 WOODLAND RD
Address
PALM SPRINGS, FL, 33461
City, State & Zip
(773) 814 0997
Daytime Telephone number
coexpress@yahoo.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL 32314

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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: OL Express Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
135 WOODLAND RD
PALM SPRINGS, FL, 33461

Mailing address, if different is:
1925 E OAKTON ST #3F
DES PLAINES, IL, 60018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSPORT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUKASZ OSIKOWICZ PRESIDENT
Address: 135 WOODLAND RD
PALM SPRINGS, FL, 33461

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: LUKASZ OSIKOWICZ
Address: 135 WOODLAND RD
PALM SPRINGS, FL, 33461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LUKASZ OSIKOWICZ
Address: 135 Woodland Rd
Palm Springs FL 33461

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]
Required Signature/Registered Agent

01-21-2011
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.

[Signature]
Required Signature/Incorporator

01-21-2011
Date

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