

P11000041536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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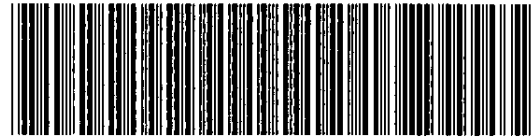
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/18/11--01053--013 **78.75

FILED
11 APR 28 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TL 04/29/11

W11-21947



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2011

RACIEL GOMEZ
17841 SW 144 AVE
MIAMI, FL 33177

RECEIVED APR 28 2011

SUBJECT: HORSE EXPRESS INC.
Ref. Number: W11000021947

We have received your document for HORSE EXPRESS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 111A00009510

COVER LETTER

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

SUBJECT: Horse 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: Raciell Gomez

Name (Printed or typed)

17841 SW 144 Ave

Address

☐ **Miami, FL 33177**

City, State & Zip

305-423-5664

Daytime Telephone number

janapq84@hotmail.com

E-mail address: (to be used for future annual report notification)

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

Horse Express Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

17841 SW 144 Ave

Miami, FL 33177

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide truck transportation services within U.S.A

ARTICLE IV SHARES

The number of shares of stock is: ~~100~~ 1,000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Raciel Gomez PD

Address: 17841 SW 144 AVE

Miami, FL 33177

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: Raciel Gomez

Address: 17841 SW 144 Ave

Miami FL 33177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Raciel Gomez

Address: 17841 SW 144 Ave

MIAMI, FL 33177

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

Raciel Gomez
Required Signature/Registered Agent

4/13/2011

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.

Raciel Gomez
Required Signature/Incorporator

4/13/2011

Date

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TALLAHASSEE, FLORIDA