## P12000049224

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
Openial instructions to 1 limits officer.	
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Office Use Only



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W12-27199

FILED 12 MAY 25 PH 3: 4.1 ECRETARY GESSEATE

## **COVER LETTER**

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

SUBJECT: Rocky Express, Inc.	
(PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
	(Printed or typed)
6739 Bouganvillea Creso	ddress
Orlando, FL 32809 City, S	State & Zip
(774) 259-1585 Daytime Te	elephone number
rocharock1@hotmail.com E-mail address: (to be used	Tor future annual report notification)

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



May 16, 2012

HELERSON O. ROCHA 6739 BOUGANVILLEA CRESENT DRIVE ORLANDO, FL 32809

SUBJECT: ROCKY EXPRESS, INC. Ref. Number: W12000027199

We have received your document for ROCKY 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 registered agent must sign accepting the designation.

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) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 512A00014486

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				AS 25	
				± ΩΩ :=	,
	ARTICLES OF INCO	RPORATION		FIL <b>2 MAY 25</b> ECRETARY LLAHASSE	
	In compliance with Chapter 607 and/		F.S. (Profit)		
ADMOT D.	NA MID			222 5 7	
ARTICLE I The name of the co	NAME orporation shall be: Rocky Express, Inc.				
	• •				
ARTICLE II	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:	ာ့မျို ယူ	
	6739 Bouganvillea Crescent Drive Orlando, FL 32809		William Basess, it differences.		
ARTICLE III	DIPPOSE	71****			
	which the corporation is organized is:				
Delivery.	. •				
ARTICLE IV	SHARES				
The number of sha	res of stock is: 15,000				
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS	S			
	ide:Helerson O. Rocha - President				
. Address:	6739 Bouganvillea Crescent Drive Orlando, FL 32809	Address:	6739 Bouganvillea Crese Orlando, EL 32809		
	COAUCO PE 32805	<u>.</u>	Chango, EL 32009	<del></del>	
Ni 4 7	Statistics of Death Tarress				
Address:	itle:Helerson O. Rocha - Treasurer 6739 Bouganvillea Crescent Drive	Address	s. <u></u>		
	Orlando, FL 32809				
		•		<del></del>	
Name and T	itle: Helerson O. Rocha - Secretary	Name and Titl	<b>e:</b>		
Address:	6739 Bouganvillea Crescent Drive	Address:			
	Orlando, FL 32809			<u></u>	
			<del></del>	<del></del>	
	REGISTERED AGENT		. •		
Name:	rida street address (P.O. Box NOT acceptable) of a Helerson O. Rocha	the registered ago	era is:		
Address:	6739 Bouganvillea Crescent Drive				
	Orlando, Fl. 32809				
ARTICLE VII	INCORPORATOR				
	fress of the Incorporator is:				
Name: Address:	Helerson O. Rocha 6739 Bouganvillea Crescent Drive				
routes.	Orlando, FL 32809				
Having been name	ed as registered agent to accept service of process	ing the place of	med companion at the place de-	ionated in	
this certificate, I at	m familiar, with and accept the appointment as regis	tered agent and	agree to act in this capacity	Rumen tu	
				) <i>i</i> . ¬	
	Yelway Locky Required Signature/Registered Agent		5-23	-70	
	Required Signature/Registered Agent		Date		
	ment and affirm that the facts stated herein are t			rátted in a	
document to the D	epartment of State constitutes a third degree felony .	as provided for i	n ±817,155, F.S.		
Ho	Conoy Rockin		t-11	- <i>i</i> ¬	
	Required Signature/Incorporator		_501		
	-				