

MAR/26/2013/TUE 01:11 PM

FAX NO.

001

37

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
EXPRESS PERFECT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

I. Burch MAR 27 2013

MAR/26/2013/TUE 01:11 PM

FAX No.

P.002

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: **EXPRESS PERFECT, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1310 NW 16 STREET

APT 119

MIAMI, FL 33125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **ANY AND LAWFUL BUSINESS**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **LISSANDRA GONZALEZ (P/D)**

Address

1310 NW 16 STREET

APT 119

MIAMI, FL 33125

Name and Title: **ROBELKIS GONZALEZ (V/D)**

Address

1310 NW 16 STREET

APT 119

MIAMI, FL 33125

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: LISSANDRA GONZALEZ
Address: 1310 NW 16 STREET APT 119
MIAMI, FL 33125

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LISSANDRA GONZALEZ
Address: 1310 NW 16 STREET APT 119
MIAMI, FL 33125

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


Required Signature/Registered Agent

03-26-2013

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.


Required Signature/Incorporator

03-26-2013

Date

FILED
13 MAR 26 PM 4:05
TALLAHASSEE, FL
SECRETARY OF STATE