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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 04/03/13

## COVER LETTER

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

SUBJECT: JDS 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: Campbell's Income Tax Services  
Name (Printed or typed)

354 NE 167th Street  
Address

North Miami Beach, Florida 33162  
City, State & Zip

305 948-3899  
Daytime Telephone number

campbellsincometax1@msn.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**

The name of the corporation shall be: JDS EXPRESS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

631 NE 171st STREET

NORTH MIAMI BEACH

FLORIDA 33162

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Trucking and Freight Hauling Services

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Delroy Parchment, President/Director

Name and Title: \_\_\_\_\_

Address 631 NE 171st Street

Address: \_\_\_\_\_

North Miami Beach

Florida 33162

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

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: Delroy Parchment  
Address: 631 NE 171st Street  
North Miami Beach, FL 33162


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Delroy Parchment  
Address: 631 NE 171st Street  
North Miami Beach, FL 33162

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

*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

03/27/2013

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

03/27/2013

Date