

P 15000055637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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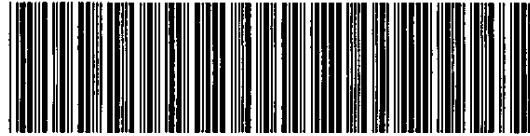
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED JUN 29 2015

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15 JUN 29 PM 2:58
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7/1/15

COVER LETTER

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

SUBJECT: Fashion 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: Ms. Peggy Johnson

Name (Printed or typed)

600 Ironwood Drive, Unit 615

Address

Ponte Vedra Beach, FL 32082

City, State & Zip

(904) 928-3333

Daytime Telephone number

petuniapatchjx@aol.com

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

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be: Fashion Express Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address
600 Ironwood Drive, Unit 615

SECRETARY OF STATE
MAILING ADDRESS, IF DIFFERENT IS: TALLAHASSEE, FLORIDA

Ponte Vedra Beach, FL 32082

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is organized for any and all lawful business purposes.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Peggy Johnson, Director, President

Name and Title: Jill Kestner, Vice President

Address: 600 Ironwood Drive, Unit 615

Address: 600 Ironwood Drive, Unit 615

Ponte Vedra Beach, FL 32082

Ponte Vedra Beach, FL 32082

Name and Title: Mark Snipes Treasurer

Name and Title:

Address: 600 Ironwood Drive, Unit 615

Address:

Ponte Vedra Beach, FL 32082

Name and Title:

Name and Title:

Address:

Address:

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: Ms. Peggy Johnson
Address: 600 Ironwood Drive, Unit 615
Ponte Vedra Beach, FL 32082

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Ms. Peggy Johnson
Address: 600 Ironwood Drive, Unit 615
Ponte Vedra Beach, FL 32082

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CLERK OF THE COURT
JANET L. HARRIS


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)


(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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



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



Date