

P15000080730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

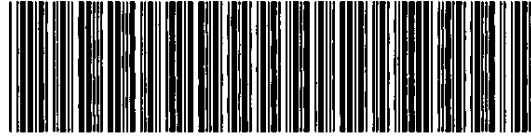
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/24/15--01007--015 **87.50

FILED
15 SEP 24 AM 12:00
SECRETARY OF STATE
ATLANTA MASSACHUSETTS FLORIDA

SEP 30 2015
W PAINTER

COVER LETTER

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

SUBJECT: SEND IT EXPRESS corp.
(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: LUZ MARINA JUSAKOS
Name (Printed or typed)
2800 SOUTH ORANGE BLOSSOM TRAIL
Address
ORLANDO, FL 32805
City, State & Zip
407 839 8558 (407) 402-2760 cell .
Daytime Telephone number
LUZJUSAKOS@GMAIL.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: SEND IT EXPRESS Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

LUZ MARINA JUSAKOS

2800 SOUTH ORANGE BLOSSOM TRAIL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: I WANT TO PUT SOME MAILBOXES

SEND PACKAGES, RECIEVE PACKAGES, SEND FAXES, ETC,

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUZ MARINA JUSAKOS (PRESIDENT) Name and Title: _____

Address 3400 SOUTH CRYSTAL LAKE DR Address: _____

Name and Title: ELIZABETH MARTINEZ (SECRETARY) Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

15 SEP 24 AM 12:00
SECRETARY OF STATE
1114 EAST STREET
TALLAHASSEE, FL 32310

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: LUZ MARINA JUSAKOS
 Address: 3400 SOUTH CRYSTAL LAKE DR.
ORLANDO, FL 32806

FILED
 15 SEP 24 AM 12:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LUZ MARINA JUSAKOS
 Address: 3400 SOUTH CRYSTAL LAKE DRIVE
ORLANDO, FL 32806

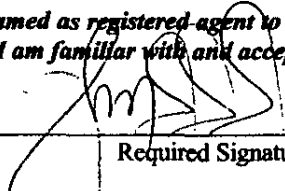
ARTICLE VIII EFFECTIVE DATE:

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.

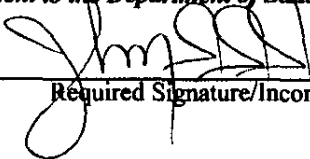
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

9-21-2015
 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

9-21-2015
 Date