

11/08/2016

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
TALLAHASSEE, FLORIDA

2016 NOV - 8 PM 12:05

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
XPRESS GRADING CORP.

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

10 11/08/2016 11:07

2nd Request

Electronic Filing Menu

Corporate Filing Menu

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NOV - 9 2016

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

H16000275918

ARTICLE I NAME: The name of the corporation is:

Xpress Grading Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

13060 mullins Ln.
Ft. Myers, FL 33913

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTOR^S AND/OR OFFICERS:

Yenny Rodriguez (P)

FILED
2016 NOV - 8 PM 12:05
STATE OF FLORIDA
TALLAHASSEE

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yenny Rodriguez
13060 Mullins Ln.
Ft. Myers, FL 33913

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Yenny Rodriguez
13060 mullins Ln.
Ft. Myers FL 33913

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11/08/2016 16:16

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LAZARUS

PAGE 03/03

NOV-7-2016 03:32P FROM: CHRISTINE PARKER

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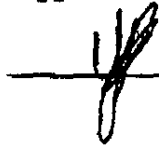
TO: 13052201440

P.3/3

H16000275918

Required Signatures:

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

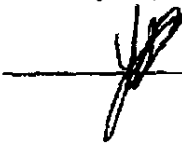


Registered Agent

11-7-16

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.



Incorporator

11-7-16

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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