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.

(((H20000141963 3)))



H200001419633ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (

: (850)617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077

Fax Number ; (845)818-3588

C RICO

MAY 1 - 20.1

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION FLEXPRESS36 Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2020 HAY 13 PM 1:29

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

ICLE II PRIN	CIPAL OFFICE Principal street address		Mailing address, if different is:		
99 61 St Pl N		15399 61	St Pl N		
nhatchee, FL 3347	70	Loxahate	Loxahatchee, FL 33470		
ICLE III PURF ourpose for which	POSE the corporation is organized is:	lawful activity			
			_	20	
				- Y	ISICH OF
				သ **	OJ.
					- 737 - 737 - 621
ICLE IV SHAI	RES 100 of stock is:	<u>-</u>		A∏: 23	SKELLYLLERS
number of shares o	of stock is:		Franklin Flores, Vice P		FROMATIONS
number of shares o	AL OFFICERS AND/OR DIRECTO	Name and Title	Franklin Flores, Vice P		FROMATIONS
number of shares of shares of shares of shares of the share and Tit	of stock is:		· ·		FIFORATIONS
Name and Tit Address	AL OFFICERS AND/OR DIRECTO Let: 15399 61St PLN	Name and Title Address:	49 Huron Ave Clifton NJ 07103	resident	FROM ATIONS
Name and Tit Address	MAL OFFICERS AND/OR DIRECTO Willy Flores, CEO 15399 61St PLN Loxabatchee, FL 33470	Name and Title Address: Name and Title	49 Huron Ave Clifton NJ 07103	resident	
Name and Titl	### AL OFFICERS AND/OR DIRECTO Willy Flores, CEO 15399 61St PI N Loxabatchee, FL 33470	Name and Title Address: Name and Title Address:	49 Huron Ave Clifton NJ 07103	resident	
Name and Titl Address	MAL OFFICERS AND/OR DIRECTO Ile: Willy Flores, CEO 15399 61St PI N Loxabatchee, FL 33470 e:	Name and Title Address: Name and Title Address:	49 Huron Ave Clifton NJ 07103	President	

Name an	d Title:	Name and Title:	···
Address	:	Address:	
	-		
	REGISTERED AGENT		
The <u>name and Fl</u>	<u>lorida streetaddress</u> (P.O. Box NOT accept Wilty Flores	table) of the registered agent is:	
Name:	winy riores		
Address:	15399 61St PI N		
	Loxahatchee, FL 33470		
ARTICLE VII	<u>INCORPORATOR</u>		
The <u>nameandae</u>	ddress of the Incorporator is:		
Name:	Willy Flores		
Address:	15399 61St PLN		
	Loxahatchee, FL 33470		
ADTICLE VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:		
	e inserted in this block does not meet the appeter inserted attention the Department of State's re		nents, this date will not be listed as
Having been nat this certificate, I	med as registered agent to accept service of am familiar with and accept the appointmen	process for the above stated co at as registered agent and agree	rporation at the place designated in to act in this capacity
W,	47-1-		05/11/2020
	Required Signature/Registered Ag	ent	Date
	cument and affirm that the facts stated her Department of State constitutes a third degr		
1	100		05/11/2020
- Acris	ired Signature/Incorporator		Date