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2/18/2022

NAME: NEXPRESS SHIPPING INC

TYPE OF FILING: ARTICLES

COST: 87.50

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE Q Hoolge

COVER LETTER

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

SUBJECT: NEXPRESS SHIPPING, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM:	Steven Hayes				

Steven Hayes	
	Name (Printed or typed)
P.O. Box 4929	
	Address
Clearwater, Florida	33758
	City, State & Zip
727-238-5734	
-	Daytime Telephone number
Steve@slhayesp	a.com
E-mail addre	ss: (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)

<u>ARTICLE I NAME</u>					
The name of the corporat	ion shall be: <u>NEXPRESS SHIPPING, I</u>	NC			
ARTICLE II PRINC	TPAL OFFICE				
C/O. Steven Hayes Principal street address 2600 East Bay. Drive Suite 230, Largo, FL		CO	Mailing address, if different is: C/O Steven Hayes		
			_P. O. Box 4929 Clearwater, FL 33758		
33771					
The number for which the					
The purpose for which to	he corporation is organized is:Any and a	ali lawlui busine	ss		
					
			-	.Sh	
				8	
ARTICLE IV SHARI				202 SF:	
The number of shares of	Stock is:			72F	
	<u>L OFFICERS AND/OR DIRECTORS</u>				
Name and Title	Will Fan , President and Sole Director	Name and Ti	the.	SS	
rane and rate		_ ranke and ra		Fr. 3 10	
Address	C/O Steven Hayes	Address:			
	2600 East Bay Drive, Suite 230			$\dot{z} = \omega$	
	<u> </u>	_	<u>t</u>	· · · · · · · · · · · · · · · · · · ·	
	Largo. FL 33771				
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Managara Arida		Kinner and Tri	41		
Name and Title:		_ Name and 11	ue:		
Address		Address:			
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Name and Title:		_ Name and Ti	tle:		
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Address		Address:			
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Name and	Title:	Name and Title	· · · · · · · · · · · · · · · · · · ·
Address		Address:	
			
			
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Steven L. Hayes		
Address:	2600 East Bay Drive, Suite 230	<u> </u>	
	Largo, Florida 33771		
<u>ARTICLE VII - II</u>	NCORPORATOR		
The <u>name and add</u>	<u>lress</u> of the Incorporator is:		
Name:	Steven Hayes		
Address:	2600 East Bay Drive, Suite 230		
-	Largo, Florida 33771		
<u>ARTICLE VIII - I</u>	EFFECTIVE DATE:		
Effective date, if of	ther than the date of filing: te is listed, the date must be specific and car	(OPTION	AL) vs prior or 90 days after the
filing.)	it is used the date mast be specific and car	and the more times tive day	ys prior or 70 days after the
	nserted in this block does not meet the applica ective date on the Department of State's recor		nents, this date will not be listed as
the document's effi Having been name		ds. ss for the above stated corpo	ration at the place designated in th
the document's effi Having been name	d as registered agent to accept service of processibility of the accept service of processibility. L. H. H. H. H. L. H.	ds. ss for the above stated corpo	ration at the place designated in th
the document's effi Having been name	ective date on the Department of State's record d as registered agent to accept service of proces	ds. ss for the above stated corpo	ration at the place designated in thi t in this capacity
the document's efficiency that the efficiency that the document's efficiency that the	d as registered agent to accept service of processibility of the accept service of processibility. L. H. H. H. H. L. H.	ds. ss for the above stated corpostered agent and agree to ac	ration at the place designated in the t in this capacity February 18,2022 Date The false information submitted in

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