

P240000 13778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

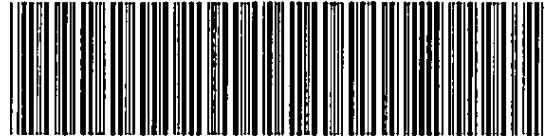
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FILED  
2004 FEB 23 AM 11:50  
CLERK OF DISTRICT COURT  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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2004 FEB 23 PM 4:29  
CLERK OF DISTRICT COURT  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: 3 Y - X Press 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: ERIKA CARABALLO - UNIVERSAL 7 SERVICES LLC  
Name (Printed or typed)

2130 W 68TH ST  
Address

HIALEAH, FL 33016  
City, State & Zip

786-343-5089  
Daytime Telephone number

UNIVERSAL7SVCS@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

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

FILED

RECEIVED 23 APR 11

STATE OF FLORIDA

**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: 3 Y XPRESS INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2245 WHITE PINE CIR UNIT D

WEST PALM BEACH, FL 33415

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: GENERAL FREIGHT TRUCKING, LONG DISTANCE

TRUCKLOAD

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ALEIDA MUSTELIER - PRESIDENT Name and Title: \_\_\_\_\_

Address 2245 WHITE PINE CIR UNIT D Address: \_\_\_\_\_  
WEST PALM BEACH, FL 33415

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

FILED  
NOV 23 AM 11:51  
CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE 11TH JUDICIAL CIRCUIT  
WEST PALM BEACH, FLORIDA

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: ALEIDA MUSTELIER  
Address: 2245 WHITE PINE CIR UNIT D  
WEST PALM BEACH, FL 33415  
\_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: ALEIDA MUSTELIER  
Address: 2245 WHITE PINE CIR UNIT D  
WEST PALM BEACH, FL 33415  
\_\_\_\_\_

**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 days prior or 90 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.*

Dianisee Escalona  
Required Signature/Registered Agent

2/23/24  
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.*

Dianisee Escalona  
Required Signature/Incorporator

2/23/24  
Date