FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

## Check this box if no longer subject to

obligat	in 16. Form 4 or ions may contination 1(b).			File							ies Exchanç mpany Act			34		II.	per response:	0.5	
Archon Capital Management LLC							2. Issuer Name <b>and</b> Ticker or Trading Symbol  EXPRESS-1 EXPEDITED SOLUTIONS  INC [ XPO ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner  Officer (give title below)  Other (specify below)			
719 SECOND AVENUE SUITE 1403						3. Date of Earliest Transaction (Month/Day/Year) 12/12/2008													
(Street) SEATTLE WA 98104 (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     Form filed by One Reporting Person     X     Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	e Se	ecuritie	s Acc	uired	. Dis	posed o	f. or	Ben	eficia	ıllv Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea						on 2A. Deemed Execution Date,			3. Transa Code ( 8)	ction	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			(A) or	5. Am Secui Benet Owne	5. Amount of		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A (C	) or )	Price	Trans	action(s) . 3 and 4)		(3 4)	
Common Stock 12/12/2						2008		P		30,900	)	A	\$0.87	727 3,	512,270	I	See Footnote 1 <sup>(1)</sup>		
Common Stock 12/16/20						008		P		50,000		A	\$0.8	35	562,270	I	See Footnote 1		
		Та									sed of, onvertib				/ Owned	1			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	ed 4. Transact Code (In		actio	5. Number		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and	7. Tit Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Dervative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code		(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nu of	nount mber ares					
		Reporting Person*	IIC																
———	<u>Capitai i</u>	<u>vialiagement</u>				_													
(Last) 719 SEC SUITE 1	OND AVEI 403	(First) NUE	(Mid	ldle)															
(Street)	E	WA	981	.04															
(City)		(State)	(Zip)	)															

(City) (State) **Explanation of Responses:** 

(Last)

(Street)

**SEATTLE** 

1. Name and Address of Reporting Person\*

**CHRISTOFILIS, CONSTANTINOS** 

(First)

WA

719 SECOND AVENUE, SUITE 1403

C/O ARCHON CAPITAL MANAGEMENT LLC

(Middle)

98104

(Zip)

1. The reported securities are directly owned by certain private investment vehicles managed by Archon Capital Management LLC and may be deemed beneficially owned by Archon Capital Management LLC as general partner of such private investment vehicles. The reported securities may also be deemed beneficially owned by Constantinos Christofilis as Managing Member of Archon Capital Management LLC. The Reporting Persons disclaim beneficial ownership of the reported securities except to the extent of their pecuniary interest therein, and this report shall not be deemed an admission that such Reporting Persons are the beneficial owners of the securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

**Archon Capital Management** 

LLC, By: Constantinos 12/16/2008

Christofilis

Constantinos Christofilis 12/16/2008

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.