

P10000048053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

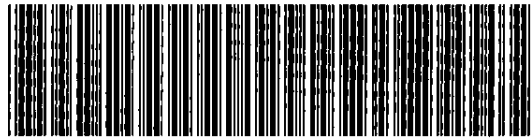
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/07/10--01039--001 \*\*70.00

FILED  
10 JUN - 7 AM 11: 27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10-8-10 CB

**COVER LETTER**

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

SUBJECT: IXAT CORP  
(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  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: PATRICIA PARKS  
Name (Printed or typed)

3917 LEMOWOOD DR  
Address

SARASOTA, FL 34232  
City, State & Zip

941-552-6456  
Daytime Telephone number

LADYTAYPARKS@GMAIL.COM  
E-mail address: (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)

**ARTICLE I NAME**

The name of the corporation shall be:

IXAT CORP

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

3917 LEMONWOOD DR  
SARASOTA, FL 34232

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO MANAGE WEBSITES

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

List name(s), address(es) and specific title(s):

MICHAEL MCKOWAN 375 W ALAMEDA AVE #202 BURBANK, Ca PRES  
PATRICIA PARKS 3917 LEMONWOOD DR SARASOTA FL V/PRES

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

PATRICIA PARKS  
3917 LEMONWOOD DR  
SARASOTA, FL 34232

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

PATRICIA PARKS  
3917 LEMONWOOD DR  
SARASOTA, FL 34232

\*\*\*\*\*  
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

Patricia Parks  
Signature/Registered Agent

6/3/10  
Date

Patricia Parks  
Signature/Incorporator

6/3/10  
Date

FILED  
10 JUN -7 AM 11:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA