

PO2000096717

TRANSMITTAL LETTER

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

500007470925--9  
-09/03/02--01037--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Pixels Design, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

09/01/02

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: Michael Pastrana  
Name (Printed or typed)  
12230 East Cove Dr.  
Address  
Orlando, FL 32826  
City, State & Zip  
407-382-9617  
Daytime Telephone number

02 SEP -3 AM 9:34

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

SMITH SEP 09 2002

3

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

PIXELS DESIGN, INC.

### ARTICLE II PRINCIPAL OFFICE

Principal place of business/mailling address is:

12230 E. Cove Dr  
Orlando, FL 32826

### ARTICLE III PURPOSE

The purpose for which the corporation is organized:

Internet Services and Consultation.

### ARTICLE IV SHARES

100 Shares of stocks at \$1.00 par value

### ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address (es):

Michael Pastrana, *President*  
12230 E. Cove Dr.  
Orlando, FL 32826

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of registered agent are:

Michael Pastrana  
12230 E. Cove Dr.  
Orlando, FL 32826

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Michael Pastrana  
12230 E. Cove Dr.  
Orlando, FL 32826

09/01/02

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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**ARTICLE VIII      EFFECTIVE DATE**

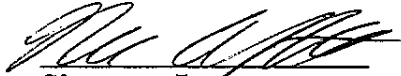
The effective date of this corporation shall be September 1, 2002.

*Having being named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statues relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent.*



Signature /Registered Agent  
Michael Pastrana

8-30-02  
Date



Signature /Incorporator  
Michael Pastrana

8-30-02  
Date

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