# P06000053522

| (Req                                    | uestor's Name)     |            |
|---|--------------------|------------|
| (Add                                    | iress)             |            |
| (Add                                    | iress)             |            |
| (City                                   | /State/Zip/Phone # | )          |
| PICK-UP                                 | WAIT               | MAIL       |
| (Bus                                    | iness Entity Name) | , <u>.</u> |
| (Doc                                    | ument Number)      |            |
| Certified Copies                        | Certificates of    | f Status   |
| Special Instructions to Filing Officer: |                    |            |
|   |                    |            |
|   |                    |            |
|   |                    |            |
|   | Office Use Only    |            |



04/13/06--01047--001 \*\*12740.00



# **COVER LETTER**

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

SUBJECT: **CORPORATE NAM** 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 |  |
|                  |  |
|                  |  |

Filing Fee, Certified Copy & Certificate of Status

\$87.50

ADDITIONAL COPY REQUIRED

FROM: RICHARD IVANS

Name (Printed or typed)

201 S BISCAYNE BLVD, SUITE 400 Address

MIAMI, FL 33131

City, State & Zip

305-595-1267

Daytime Telephone number

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:

# UXTX CORP

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

201 S BISCAYNE BLVD, SUITE 400, MIAMI, FL 33131 MAILING ADDRESS: P. O. BOX 14-4597, CORAL GABLES, FL 33114

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

## ARTICLE IV SHARES

The number of shares of stock is: 500

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

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

#### ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is: RICHARD IVANS, 201 S BISCAYNE BLVD, SUITE 400, MIAMI, FL 33131

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: RICHARD IVANS, 201 S BISCAYNE BLVD, SUITE 400, MIAMI, FL 33131

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

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

lignature/Registered Agent

Signature/Incorporator

2006 APR 13 PM 12: 29 SECRETARY OF STATE TALLAHASSEE, FLORID, LORIDA

FILED