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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
06 APR 13 PM 12:45

B. McKnight APR 14 2006

## COVER LETTER

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

SUBJECT: NUXTS 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: 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:

NUXTS 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

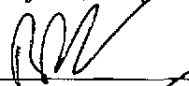
The name and address of the Incorporator is:


RICHARD IVANS, 201 S BISCAYNE BLVD, SUITE 400, MIAMI, FL 33131

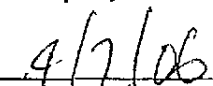
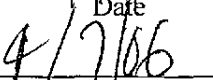
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 APR 13 PM 12:45

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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

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date