06600053623

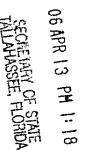
(Requestor's Name)				
(Address)				
(Address)				
(1881855)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
•				
(Document Number)				
(boodinent Namber)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special industrials to 1 ming Officer.				

Office Use Only



500070326475

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



00 414 AL

COVER LETTER

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

Tallahassee, FL 32	314		
SUBJECT:	Vaxf Cox	P .	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an original	ginal and one (1) copy of the artic	cles of incorporation and	l 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
		ADDITIONAL CO	Status DPY REQUIRED
FROM: R	IICHARD IVANS		
	Name	(Printed or typed)	
	201 S BISCAYNE BLVD,		
	Ā	Address	
	MIAMI, FL 33131		
	City,	State & Zip	
	305-595-1267		
	Daytime T	elephone 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)

FILED 06 APR 13 PM 1:18

ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

VQXF 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 <u>name and Florida street address</u> (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

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