

PO60000053652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-14-06  
WV

## COVER LETTER

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

SUBJECT: \_\_\_\_\_

TYXV 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.**

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

The name of the corporation shall be:

The principal place of business/ mailing address is:

MAILING ADDRESS: P. O. BOX 14-4597, CORAL GABLES, FL 33114

ANY AND ALL LAWFULL BUSINESS

## 500

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

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

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/Incorporator

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TALLAHASSEE, FLORIDA