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(Re	questor's Name)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phone #	•)
PICK-UP	☐ WAIT	MAIL
	F-25-31	
(Bu	siness Entity Name)
(Do	cument Number)	<u></u> -
, –	•	
Certified Copies	_ Certificates o	f Status
Special Instructions to Filing Officer:		

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch APR 14 2006

COVER LETTER

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

SUBJECT:	$W \times \Lambda \Lambda$	Cosp	
Enclosed are an ori	(PROPOSED CORPORA-		
₹70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: F	RICHARD IVANS		
	Name ((Printed or typed)	
	201 S BISCAYNE BLVD, S	·	
	A	ddress	
	MIAMI, FL 33131		
	City,	State & Zip	
	305-595-1267		
	Daytime Te	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)

ARTICLE I NAME

The name of the corporation shall be:

MXYV 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 <u>name and address</u> of the Incorporator is:

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

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****************	************
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered a	the above stated corporation at the place designated in this gent and agree to act in this capacity
Signature/Registered Agent Signature/Incorporator	Date Date

PILED 2006 APR 13 PM 2: 08 SECRETAFIY OF STATE SECRETAFIY OF STATE ANIASSEE, FLORIDA