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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(2.50.0000 2.7.00)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Opecial instructions to Filling Officer.				

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OF APR 13 PM 1:57

SECRETARY OF STATE
SECRETARY OF STATE

C. g. 4-1

COVER LETTER

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

SUBJECT:	ZUXF	Corp	
	(PROPOSED CORPORA		
Enclosed are an orig	ginal and one (1) copy of the arti	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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: R	ICHARD IVANS		
	Name	(Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	201 S BISCAYNE BLVD, S	SUITE 400	
	MIAMI, FL 33131	5 A DI	<u></u>
	City,	State & Zip	
	305-595-1267	elephone number	· · · · · · · · · · · · · · · · · · ·
Dajunio 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)

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ARTICLE I NAME

The name of the corporation shall be:

06 APR 13 PM 1:57

ZUXF CORP

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

***************	*****************
Having been named as registered agent to accept service of p certificate, I am familiar with and accept the appointment as re	rocess for the above stated corporation at the place designated in this egistered agent and agree to act in this capacity
Me	4/7/06
Signature/Registered Agent	412106
Signature/Incorporator	Date