120006743

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

Office Use Only



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09/07/12--01019--003 **70.00

12 SEP -7 AMII: 04

Ps 9/10/12

COVER LETTER

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

SUBJECT:	XTAKTYX, Inc.						
	(PROPOSED CORPORA	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)				
Enclosed are an origi	nal and one (1) copy of the art	ticles of incorporation an	d a check for:				
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status				
		ADDITIONAL C	OPY REQUIRED				
FROM:	Integrity B	usiness Services (Printed or typed)					
	224-B Gold Rush Road Address						
	Address						
	Lexington, KY 40503 City, State & Zip						
	859-335-5281 Daytime Telephone number						
	•	•					
	E-mail address: (to be use	HOTMAIL.COM ed for future annual report	notification)				

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 SECRETARY OF STATE BIVISION OF CORPORATIONS

ARTICLE I	NAME		XTAKTYX	(, INC.			
The name of the	corporation shall be:			•		12 SEP -7	AMII: O4
ARTICLE II	PRINCIPAL OFF					12 1100	
	Principal <u>street</u> 142 PALMETT	address				ess, if different is: DRUSH ROAD	
		4			224-13 000	<u> </u>	
	_INDIALANTIC, F				LEXINGTO	ON, KY 40503	<u></u>
ARTICLE III	PURPOSE						
The purpose for	which the corporation	is organized i	S:		0.050\//05	_	
	BUSINESS MAI	NAGEMEN	AT AND CO	NSULTING	G SERVICE	5	
ARTICLE IV	SHARES						
	hares of stock is: ON	E HUNDR	ED (100)				
	INITIAL OFFICE						
	Title: KEVIN M. GC						
Address:			<u>/E</u>	Address:			
	UNDIALAN	IT#14		-			
		,					
	Title:			Name and T			
Address:				Address:			
				_			
Numeround	Title:			None and T	'iela:		
Address:	11116.			Address:			
				-		· · · · · · · · · · · · · · · · · · ·	- H William To de Administration
	REGISTERED A		C - a s smeak last a f	the manufactured	navant los		
I ne <u>name and I</u> Name:	Florida street address (I KEVIN			the registered	agent is,		
Address:			UNIT # 14	•			
			32903				
ARTICLE VII	INCORPORATO	₹					
	address of the Incorporat	**					
Name:		D O'ROU					
Address:	_224-B_GQ	LD RUSH ON, KY 4		-			
			-				
	med as registered agen ' am familiar with and a						signated in
in certificate,		ccepa and appa	······································	merca ngamin			
	Jan Hiller					08/20/201	12
	Required Sig	nature/Registo	ered Agent			Date	
	ocument and affirm that Department of State co						mitted in a
		/~	/			08/20/20	112
	Required S	ignature/Inco	rporator			Date	, , <u>L</u>