

P13000100011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

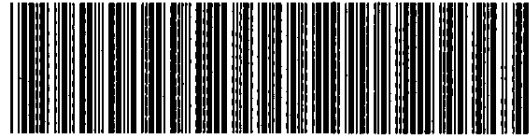
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/16/13--01013--015 \*\*70.00

SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
13 DEC 16 AM 10:13

*[Handwritten signature]*  
12/17/13

## COVER LETTER

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

SUBJECT: **Xecute, Inc.**

(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: **Patrick Rajkumar**

Name (Printed or typed)

**2126 NW 159th LN**

Address

**Pembroke Pines, FL 33028**

City, State & Zip

**954-684-2492**

Daytime Telephone number

**paulrajkumar@comcast.net**

E-mail address: (to be used 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)

SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
13 DEC 16 AM 10:14

**ARTICLE I NAME**

The name of the corporation shall be: Xecute, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: \_\_\_\_\_

2126 NW 159th LN  
Pembroke Pines, FL 33028

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Grow a profitable business by leveraging the skills of the corporate leadership to create efficiencies in operations and deliver expert services to the business community.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Patrick Rajkumar/President

Address: 2126 NW 159th LN  
Pembroke Pines, FL 33028

Name and Title: Karen Rajkumar/Vice President

Address: 2126 NW 159th LN  
Pembroke Pines, FL 33028

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VIII EFFECTIVE DATE**

The effective date of the corporation is January 1, 2014

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

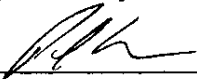
Name: PATRICK RAJKUMAR  
Address: 2126 NW 159 LANE  
PEMBROKE PINES, FL 33028

**ARTICLE VII INCORPORATOR**


The **name and address** of the Incorporator is:

Name: Patrick Rajkumar  
Address: 2126 NW 159th LN  
Pembroke Pines, FL 33028

*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*

 10-30-13  
Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

 10-30-13  
Required Signature/Incorporator Date