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(Red	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section Division of Corporations	:
SUBJECT: Information Technology	Consulting Company
	oration - must include suffix)
Dear Sir or Madam:	
	n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation t
Please return all correspondence concerning this m	atter to the following:
Leslie Peterson	•
(Nan	ne of Person)
Information Technology Consulting	g Company
	n/Company)
5310 Lexington Woods Lane	
	Address)
Johns Creek, GA 30005	•
-	tate and Zip code)
For further information concerning this matter, please.	ase call:
(Name of Person) (A	rea Code & Daytime Telephone Number)
·	i i
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	·
\$70.00 Filing Fee \$\sqrt{2}\$ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 14, 2008

LESLIE PETERSON 5310 LEXINGTON WOODS LANE JOHNS CREEK, GA 30005

SUBJECT: INFORMATION TECHNOLOGY CONSULTING COMPANY

Ref. Number: W08000051874

We have received your document for INFORMATION TECHNOLOGY CONSULTING COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Letter Number: 608A00057261

Tim Burch Regulatory Specialist II

Division of Corporations DO ROY 6997 Tollahasias Florida 9991

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

GA	name adopted for the purpose of transacting business in Fl. 3. 20-5776248	orida)
(State or country under the law of which it is incorporated	(PEI number, if applicable)	
10-06-06	5. Perpetual	
(Date of incorporation)	5. (Duration: Year corp. will cease to exist or "perpet	hielm
(Due of Moorportation)	(Duration, 1 car sorp. will sease as exist or perper	,
	ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)	
5310 Lexington Woods Lane, Johns		
(Principal office	·	
5310 Lexington Woods Lane, Johns		<u> </u>
(Current mailing	ng address)	
IT Consulting and Staffing		i ည • ထ
(Purpose(s) of corporation authorized in home state	e or country to be carried out in state of Florida))
Name and street address of Florida registered agent:	(P.O. Box NOT acceptable)	, N
Name: NRAI Services	Inc.	· 元
ffice Address: 2731 Executive Pa	ack Drive SS	. <u>\</u>
Westen, Ft. (City)		80
(City)	(Zip code)	
Registered agent's acceptance:		ا د ا
	service of process for the above stated corporation a pointment as registered agent and agree to act in this	
	ites relative to the proper and complete performance	

Lindsey Klemency/Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Leslie Peterson Address: 5310 Lexington Woods Lane, Johns Creek GA 30005 Vice Chairman: __ Address: _ Director: Leslie Peterson Address: 5310 Lexington Woods Lane, Johns Creek GA 30005 Director: Kevin Peterson 232 Jackies Terrace, Madison AL 357587703 **B. OFFICERS** President: Leslie Peterson Address: 5310 Lexington Woods Lane, Johns Creek GA 30005 Vice President: ___ Address: Secretary: Audra Peterson Address: 5310 Lexington Woods Lane, Johns Creek GA 30005 Treasurer: Audra Peterson Address: 5310 Lexington Woods Lane, Johns Creek GA 30005 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. Leslie Peterson, Pres.

(Typed or printed name and capacity of person signing application)

Control No. 0685781

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530 **CERTIFICATE**

OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

INFORMATION TECHNOLOGY CONSULTING COMPANY

Domestic Profit Corporation

was formed or was authorized to transact business on 10/06/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 19th day of November, 2008

> Karen C Handel Secretary of State

Faun CHandel

Certification Number: 3258069-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp