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COVER LETTER

TO:	O: Registration Section Division of Corporations				
SUBJ	ECT:	Integrated Technical Systems	, Inc.		
		Name (of corporation	- must include suffix	
Dear S	ir or M	adam:			
"Certif	icate o	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Stane	ding" and check are sul	
Please	return	all correspondence concerni	ng this matter	to the following:	
Michae	l Salam	one			
	•		Name of	Person	
Integrat	ted Tecl	nnical Systems, Inc.			
			Firm/Com	pany	
8 Capita	al Drive	:			
			Addre	ess	
Walling	gford, C	T 06492			
			City/State ar	nd Zip code	
msalam	ione@ii	ntegrated-tec.com			
		E-mail address	: (to be used f	or future annual report	notification)
For fur	ther in	formation concerning this m	atter, please c	all:	
Michae	l Salam	one	203 at (265-8111	
	Nam	e of Person	Area Code		phone Number
	Regis Divis The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303		MAILING A Registration of O Division of O P.O. Box 632 Tallahassee.	Section Corporations 27
Please r	nake ch	check for the following amo	EPARTMENT		□ 6 97 5 0 1 33 1 33 1 33
₹ 3/U	.uu rii:	ng Fee	_	3 \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 6, 2025

MICHAEL SALAMONE 8 CAPITAL DR WALLINGFORD, CT 06492

SUBJECT: INTEGRATED TECHNICAL SYSTEMS, INC.

TO STREET OF THE STREET OF THE

Ref. Number: W25000001713

We have received your document for INTEGRATED TECHNICAL SYSTEMS, INC. and your check(s) totaling \$70.00. 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) 245-6051.

Tracy L Lemieux Regulatory Specialist II

to provide contracting to the traction

gerangga er i in in

Letter Number: 425A00000372

RECEIVED

JAN 24 2025

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.

"Inc.," "Corp." "Inc.," "Corp." "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Connecticut 3. 27-1951004 (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date of inst transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Capital Drive, Wallingford, CT 06492 (Principal office street address) (Current mailing address, if different)	/Date	Integrated Technical Systems, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"		
(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpennal) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office attrect address) (Capital Drive, Wallingford, CT 06492 (Current mailing address, if different) Name: (Current mailing address, if different) Name: Douglas Benaman Companies and attract address of Florida registored agent: (P.O. Box NOT acceptable) Name: 1050 Wayne Ave, Suite #16 New Smyrna Beach (City) Registered agent's acceptance:	inc.," "Co.," "C	corp." "Inc." "Co," or "Corp.")	"COMPANT," "CORPORATION,"	
(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Capital Drive, Wallingford, CT 06492 (Principal office street address) (Current smalling address, if different)				
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O D TO THE PARTY OF THE PARTY O	Name: ice Address:	(Current mailing et address of Florida registered agent: (P.O Douglas Benaman 1050 Wayne Ave, Suite #16 New Smyrna Beach (City)	Box NOT acceptable) , Florida 32168	
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11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS			
□Chairman	Michael Salamone Name:	□ Chairman	Michael Sosnovich Name:
□Vice Chairman	8 Capital Drive Address:	□Vice Chairman	8 Capital Drive
□Director	Wallingford, CT 06492	□Director	Wallingford, CT 06492
President		□President	
□Vice President	····	□ Vice President	
□Secretary	□Treasurer	■ Secretary	□Treasurer
□Other	Other	Other	□Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurcr	☐ Secretary	□Treasurer
□Other	□Other	Other	Other
□Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□ Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	Other	Other
Important Notice individuals may be	se in anachment to report more than six (6). The attac added to the index when filing your Florida Departmen	hment will be image nt of State Annual Re	d for reporting purposes only. Non-indexed sport form.
12.	Signature of Director or	000	
	-		
The officer or direct she is aware that fa s.817.155, F.S.	ctor signing this document (and who is listed in number alse information submitted in a document to the Departn	11 above) affirms the nent of State constitu	at the facts stated herein are true and that he or tes a third degree felony as provided for in
17	MULLAN SALAMOUR PARALO	1 411	

Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Friday, January 17, 2025 4:09 PM

Certificate Number: C-00154519

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of incorporation for the below domestic Stock corporation was filed in this office.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far, as indicated by the records of this office, such corporation is in existence.

Business Details

Business Name	INTEGRATED TECHNICAL SYSTEMS, INC.
Business ALEI	US-CT.BER:0987374
Formation Date	02/22/2010

Secretary of the State

Business ALEI: US-CT.BER:0987374

Note: To verify this certificate, visit Business.ct.gov

Page 1 of 1