POODON 77312

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

400003346274--4 -08/04/00--01048--009 ******78.75 ******78.75

SUBJECT:	PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	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		
FROM	: Brian Cape Name (Pr	[[arO inted or typed)			
	123 Cypress	C Sul		00 A	
	Jupiter Fi	33458 State & Zip		AUG 15 /	FILED
	56, 373.151	3 lephone number	FLORID.	AM 9: 11	D

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 9, 2000

BRIAN CAPELLARO 123 CYPRESS COVE JUPITER, FL 33458

SUBJECT: ITCAS, INC.

Ref. Number: W00000019735

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

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return the original and one copy of 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) 487-6928.

Tim Burch Document Specialist

Letter Number: 200A00043087

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) **ARTICLE** Ţ NAME The name of the corporation shall be: ItCAS, Inc. **ARTICLE** PRINCIPAL OFFICE The principal place of business/mailing address is: 601-202 Seafarer Circle Jupiter, FL 33477 **ARTICLE PURPOSE** IIIThe purpose for which the corporation is organized is: Consult and contract work for corporations with IT needs ARTICLE \underline{IV} SHARES The number of shares of stock is: 100 **ARTICLE** INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): Brian C Capellaro 123 Cypress Cove Jupiter, FL 33458 ARTICLE REGISTERED AGENT The name and Florida street address of the registered agent is: Brian C Capellaro 123 Cypress Cove Jupiter, FL 33458 ARTICLE **INCORPORATOR** The name and address of the Incorporator is: Brian C Capellaro 123 Cypress Cove Jupiter, FL 33458 ******************************* 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 07/15/00 re/Registered Date

07/15/00 Date