## TRANSMITTAL LETTER

SECKETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT:	IT Business t				
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCLU</u> SI	<u>DE SUFFIX</u> ) <b>00004663</b> -11/02/01( ******70.00	8880 31029005 ******70.00	
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  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: MARK Indelicato  Name (Printed or typed)					
5440 Beaumont Center Blvd., #490					
Tampa, FL 33634 City, State & Zip					
877-877-7857  Daytime Telephone number					

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
ARTICLE I NAME	
The name of the corporation shall be:	01 NOV -2 AM 9: 58
IT Business Professionals, INC.	SECRETARY OF STAIL TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
5440 Beaumont Center Blvd., #490 Tampa, FL 33634	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	-
Website development, hosting, promotion, l	Information Technology Services
ARTICLE IV SHARES	
The number of shares of stock is: 100000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (option	nal)
The name(s), address(es) and title(s):	
MARK S. Indelicato	
5440 Beaumont Center Blvd., #490	
Tampa, FL 33634 VP. IT Programming and E-Gommerce Development	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> of the registered agent is:	
MARK S. Indelicate 5440 Beaumont Center Blud., #490 Tampa, FL 33634	
lampa, PC 3303-1	
ARTICLE VII INCORPORATOR	<del></del>
The <u>name and address</u> of the Incorporator is:	
MARK 5. Indelicats 5440 Beaumont Center Blud., #490	
Tampa, FC 33634	
	************
Having been named as registered agent to accept service of process for the abo- certificate, I am familiar with and accept the appointment as registered agent an	ve stated corporation at the place designated in this ad agree to act in this capacity
1 10-110-1	1, 10,10,11
Signature/Registered Agent	
had Odd OA	10/18/2001
Signature/Incorporator	Date

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