

P:10000021825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

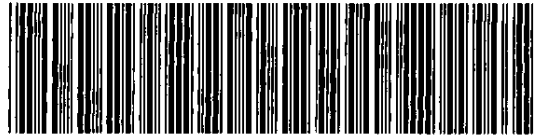
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



600171594886

03/10/10--01014--003 \*\*70.00

FILED  
10 MAR 10 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3-11-10 5

## COVER LETTER

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

**SUBJECT:** Integrated Change-Identification Technologies, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** J. Michael Brown

Name (Printed or typed)

8774 SW 89th Lane

Address

Gainesville, FL 32608

City, State & Zip

352-495-3300

Daytime Telephone number

michael.brown@world-of-change.org

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)

## **ARTICLE I NAME**

The name of the corporation shall be:

Integrated Change-Identification Technologies, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

8774 SW 89th Lane

Gainesville, FL 32608

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in business activities permitted by Florida laws.

## **ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

List name(s), address(es) and specific title(s):

Mark J. Michael Brown  
Messersmith

## **ARTICLE VI REGISTERED AGENT**

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

J. Michael Brown

8774 SW 89th Lane

Gainesville, FL 32608

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


J. Michael Brown

8774 SW 89th Lane

Gainesville, FL 32608

\*\*\*\*\*

*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*

  
\_\_\_\_\_  
Signature/Registered Agent

03/08/10

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

03/08/10

\_\_\_\_\_  
Date

FILED  
10 MAR 10 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA