

P10000035179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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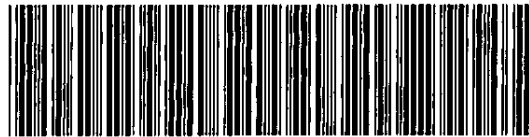
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 APR 22 AM 9:40

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COVER LETTER

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

SUBJECT: Integration Technologies Corp.

(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Gail McDermott

Name (Printed or typed)

21350 Sonesta Way

Address

Boca Raton, Florida 33433-2373

City, State & Zip

561-866-3963

Daytime Telephone number

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:

Integration Technologies Corp.

ARTICLE II PRINCIPAL OFFICE

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

21350 Sonesta Way

Boca Raton, Florida 33433-2373

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Systems Integration & Maintenance

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jack Goodwin

President

ARTICLE VI REGISTERED AGENT

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

Gail McDermott

21350 Sonesta Way

Boca Raton, FL 33433-2373

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gail McDermott

21350 Sonesta Way

Boca Raton, FL 33433-2373

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

Gail McDermott

Signature/Registered Agent

Gail McDermott

Signature/Incorporator

4/20/10

Date

4/20/10

Date

FILED
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TALLAHASSEE, FLORIDA
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