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COVER LETTER

SUBJECT: IT ENTERPRISES INC. Name of Corporation DOCUMENT NUMBER: P11000071547 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JHON F. CASTRO. Name of Contact Person IT ENTERPRISES INC Firm/Company 260 PALM RIVER DRIVE SUITE A201 Address NAPLES, FLORIDA 34110 City/State and Zip Code Jhoncastro@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANET G. CIILO, CPA Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	TO: Amendment Section Division of Corporations			
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CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: IT ENTERPRISES INC.		
2. The principal office address: 260 PALM RIVER DRIVE, SUITE A201		
NAPLES, FLORIDA 341	10	
3. The mailing address (if different):		
	!	
4. Date of incorporation/qualification: 8/9/2011 Doc	ument number: P11000071547	
5. The name and street address of the current registered agent and re Florida Department of State: (If resigned, enter resigned)	egistered office on file with the	
CORPORATION SERVICE COMPANY		
1201 HAYS STREET	AUG T	
TALLAHASSEE, FLORIDA 32301		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
JHON F. CASTRO	55	
260 PALM RIVER DRIVE SUITE A201		
P.O. Box NOT acceptable NAPLES, FLORIDA 34110		
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the comporation has been notified in writing of the change.		
authorized by the board or the comporation has been notified in	ţ	
Significate of an officer or defector	John F. Castro	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.		
than fund	8/19/2011	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
IT ENTERPRISES INC. Typed or Printed Name		
* * * FILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)