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COVER LETTER

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

SUBJECT: Proposed Corporate Name for ITCLLC, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

Filing Fee & Certificate of Status	Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
FROM: John R Hawkins Name	(Printed or typed)			
1888 Sunset Woods Ct. Address				
Clearwater, FL. 33763	State & Zip	<u> </u>		
480-694-7696 Daytime Telephone number				
john.hawkins@itcllc.net 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 ITCLLC, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>1888 Sunset Woods Ct.</u> <u>Clearwater, FL. 33763</u> Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide any and all lawful products and services within the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Tit	le: John R. Hawkins President	Name and Title:	
Address:	1888 Sunset Woods Ct.	Address:	* · · · · · · · · · · · · · · · ·
	Clearwater, FL 33763		•
Name and Tit Address:	le: John R Hawkins Secretary 1888 Sunset Woods Ct. CLearwater, FL 33763	Name and Title: Address:	
Name and Tit	le:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		
The name and Flor	ida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	John R Hawkins		
Address:	1888 Sunset Woods Ct		
	Clearwater, FL 33763		
ARTICLE VII	INCORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	John R Hawkins		1997 - 1997 -
Address:	1888 Sunset Woods Ct.	<u></u>	
	Clearwater, FL 33763		

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 occept the appointment as registered agent and agree to act in this capacity

2017 Required Signature/Registered Agent

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

5/1/2012