## P1200082855

(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



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09/20/12--01017--004 \*\*78.75

GEORETARY OF STATE
BIVISION OF CORPORATIONS

12-4-6735 Ps 10/1/12

## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 21, 2012

DANIEL A BURGOON 1240 STONEHEDGE TRAIL LANE ST AUGUSTINE, FL 32092

SUBJECT: IT RISK ADVISORY, INC.

Ref. Number: W12000048736

SECREMAN OF STATE

We have received your document for IT RISK ADVISORY, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 312A00023702

## **COVER LETTER**

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

SUBJECT:	IT RISK Advisor (PROPOSED CORPO	y , Inc	
	(PROPOSED CORPO	RATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the a	articles of incorporation ar	nd a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL C	OPY REQUIRED
FROM:	Daniel A. Burgo		
	1240 Stonehedge	Trail Lane Address	
_	St. Augus	tine, FL 32092 ty, State & Zip	
<del></del>	H43 5 Daytimo	70 4950 Telephone number	
	dan@itriskadvisi E-mail address: (to be u	ocy. com used for future annual repor	t 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)

SECRETARY OF STATE
BIVISION OF CORPORATIONS

ARTICLE I	NAME		in ore	911,41
The name of the o	corporation shall be: IT RISK Advisory, In	c.	12 SEP 28	PH 1: 4
ARTICLE II	PRINCIPAL OFFICE			-
	Principal street address	Mailing ad	dress, if different is:	
	1240 Stonehedge Trail Lane			
	St. Augustine, FL 32092			
RTICLE III	PURPOSE			
he purpose for	which the corporation is organized is:	Zick Consulting		
		13F C01149111115		
RTICLE IV				
ne number of sh	ares of stock is: 100			
RTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	<b>S</b>		
Name and 1	Title: Paniel A. Burgoon, vice Presid	MName and Title:		
Address:	1240 Stonehedge Trail Lane	Address:		
	St. Augustine, FL 32092	<del>-</del>		
., .,				
Name and I Address:	Fille: Amber L. Burgoon, President 1240 Stonehedge Trail Lane	Name and Title:	<del></del>	<del></del>
Tradi Vivi	St. Augustine, FL 32092			
Name and T	Fitle:	Name and Title:		
Address:		A dalmana.		
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name:	Daniel A. Burgon	the registered agent is.		
Address:	1240 Stonehedge Trail Lane	<del>-</del> <del>-</del>		
	St. Augustine, FL 32092	_		
	INCORPORATOR			
	dress of the Incorporator is:			
Name: Address:	1240 Stonehedge Trail Lane	-		
- 1441 0007	Daniel A. Burgoon 1240 Stonehedge Trail Lane St. Augustine, FL 32092	<u>.</u>		
wina hoon nan	ned as registered agent to accept service of process		ation at the place design	uatad in
s certificate, I a	on familiar with and accept the appointment as regi	istered agent and agree to act	anon at the place aesig t in this capacity	питеи т
		<b>.</b>		
	Required Signature/Registered Agent		<u>9/17/12</u> Date	
	Required Signature/Registered Agent		Date	
ubmit this doci	ument and affirm that the facts stated herein are	true. I am aware that the fo	alse information submit	ted in a
cument to the D	Department of State constitutes a third degree felony	as provided for in s.817.155	, F.S.	
			-1-1	
	Required Signature/Incorporator	<del></del>	9/17/12	