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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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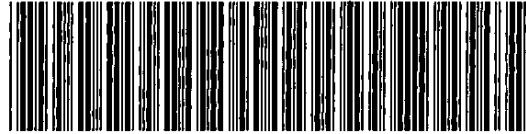
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SPENCER AND ASSOCIATES, INC. (S+A)
(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: VINCENT A. SABIO
Name (Printed or typed)

237 MONTEREY DR.
Address

NAPLES, FL. 34119
City, State & Zip

(279) 352-6350
Daytime Telephone number

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:

SPENCER AND ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

c/o VINCENT A. SABIO
237 MONTEREY DR. NAPLES, FL. 34119

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RECRUITING FOR EXECUTIVE POSITIONS AND ANY
OTHER LEGAL BUSINESS FOR PROFIT

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):

VINCENT A. SABIO 237 MONTEREY DR. NAPLES, FL. 34119 PRES./TREASURER
FLORENCE STANOWY 4451 WEIDMAN AVE. NORTH PORT, FL. 34786
V. PRES./SEC.

ARTICLE VI REGISTERED AGENT

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

VINCENT A. SABIO 237 MONTEREY DR. NAPLES, FL. 34119

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VINCENT A. SABIO 237 MONTEREY DR. NAPLES, FL. 34119

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

Vincent A. Sabio
Signature/Registered Agent

Vincent A. Sabio
Signature/Incorporator

9/10/07
Date

9/10/07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA