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(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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J. SHIVERS MAR 21 2011

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: SPANALL CSMMUNICATION. Name of corporation - must include suffix	s, INC.
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transac "Certificate of Existence," or "Certificate of Good Standing" and check are subsabove referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
E. SANCHEZ	
Name of Person	
SPANALL COMMUNICATIONS, /NC.	
16192 COASTAL HIGHWAY Address	
Address	• • • • • • •
LEWES, DELAWARE 19958-9776 City/State and Zip code	•
City/State and Zip code **REGULATORY & SPANAU. COM E-mail address: (to be used for future annual report n	
E-mail address: (to be used for future annual report n	notification)
For further information concerning this matter, please call:	ILLAHAR
E. SANCHC2 at (302) 827-388 Name of Person Area Code & Daytime Telepho	SS Man
Name of reison	one Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building. 2661 Executive Center Circle Tallahassee, FL 32301 MAILING AI New Filing Se Division of Co P.O. Box 6327 Tallahassee, FL	ction orporations
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\text{Certificate of Status}\$ \$78.75 Filing Fee \$\text{Certified Copy}\$	\$87.50 Filing Fee, Certificate of Status & Certified Copy

12. Names and business addresses of officers and/or directors: A. DIRECTORS ,	
Chairman: <u>C. SANCHEZ</u> Address: <u>16192 COASML HIGHWAY</u>	Lewes, DE 19958-9776
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
President: <u>E. SANCHEZ</u> Address: <u>16192 COASMAC HIGHWAY</u>	1, LEWES, DE 19958-9776
Vice President:	35 23 F: II
Address:	
Secretary:	
Address:	
Treasurer:	ST P
Address:	
NOTE: If necessary you may attach an addendum to the applica	ation listing additional officers and/or directors.
Signature of Director The officer or director signing this document (and who is listed in are true and that he or she is aware that false information submitted third degree felony as provided for in s.877.155, F.S. 14 Concurred Paccinetic Director Paccinetic Director The officer or director signing this document (and who is listed in are true and that he or she is aware that false information submitted third degree felony as provided for in s.877.155, F.S.	n number 12 above) affirms that the facts stated herein ed in a document to the Department of State constitutes a

(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF INCORPORATION OF "SPANALL

COMMUNICATIONS, INC.", FILED IN THIS OFFICE ON THE EIGHTEENTH

DAY OF FEBRUARY, A.D. 2011, AT 4:23 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE SUSSEX COUNTY RECORDER OF DEEDS.

2011 MAR 17 AM 11: []

4942780 8100

110182693

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 8583637

DATE: 02-25-11

You may verify this certificate online at corp.delaware.gov/authver.shtml