

TRANSMITTAL LETTER

PO1000065739

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

SUBJECT:

SPIVEY & COMPANY, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUL -3 PM 12:18

APPROVED
AND
FILED

Enclosed is 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

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 JUL -3 PM 12:05
NEED TO KNOWLEDGE
SUFFICIENCY OF FILING

FROM:

SPIVEY & COMPANY, INC.
Name (Printed or typed)

9029 GLEN EAGLE WAY
Address

TALLAHASSEE, FL 32312
City, State & Zip

(850) 894-8945
Daytime Telephone number

200004458182--3
-07/03/01--01052--017
*****87.50 *****87.50

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:

SPIVEY : COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9029 GLEN EAGLE WAY TALLAHASSEE, FL 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSULTING

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

H. RUSSELL SPIVEY

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

H. RUSSELL SPIVEY, JR
9029 GLEN EAGLE WAY
TALLAHASSEE, FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

H. RUSSELL SPIVEY, JR
9029 GLEN EAGLE WAY
TALLAHASSEE, FL 32312

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


Signature/Registered Agent

5/1/01
Date


Signature/Incorporator

5/1/01
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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