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COVER LETTER

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

SUBJECT:	Spivak M				
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u> I	<u>UDE SUFFIX</u>)		
		, <i>,</i>			
Enclosed are an original	inal and one (1) copy of the artic	cles of incorporation and	a check for:		
1070.00	□ #70.75		T #97.50		
Elling Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	S87.50 Filing Fee,		
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	· ADDITIONAL COPY REQUIRED				
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	Roas	+ Sairal			
FROM:	Robert Spivak Name (Printed or typed)				
	20 Island Avenue #516				
Address					
	Mian Rul	E/	72129		
	Miam; Beach FL 33139 City, State & Zip				
•					
	305-951-4322 Daytime Telephone number				
•	Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

NECREAL SECONS AND AS 16 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: Spirak MainteNANCE Co. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 20 Island Avenue # 516 Miam: Beach FK 33/39 ARTICLE III PURPOSE The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Robert Spirak 20 Island Avenue # 516 Miami Beach FL 33139 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Robert Spivak 20 Island Avenue #516 Miami Boach FL 33139 INCORPORATOR ARTICLE VII The name and address of the Incorporator is: Robert Spirak 20 Island Avenue # 576 Miami Beach FL 33139 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

Date

| 1/26/07 |
| Signature/Incorporator | Date