

N103000004688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

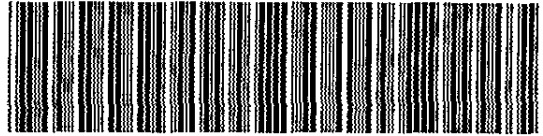
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 MAY 29 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05/28/03 10/14

**TRANSMITTAL LETTER**

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

**SUBJECT:** AQUA-BALANCE INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

**ADDITIONAL COPY REQUIRED**

**FROM:** FRANK BARONE JR.  
Name (Printed or typed)

PO BOX 654  
Address

PONCE DE LEON, FL 32455  
City, State & Zip

850-836-4200  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

AQUA-BALANCE INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

2920 HIGHWAY 81  
PO BOX 654  
PONCE DE LEON, FL 32455

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Organized exclusively for educational and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt under section 501(c)(3) of the Internal Revenue Code.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

DIRECTORS ARE ELECTED OR APPOINTED BY THE CURRENT BOARD OF DIRECTORS VOTING BY VOICE.

**ARTICLE V INITIAL DIRECTORS/OFFICERS**

The name(s), address(es) and title(s):

FRANK BARONE JR, EXECUTIVE DIRECTOR, PO BOX 654, PONCE DE LEON, FL  
DAWN SPIETH, DIRECTOR OF EDUCATION AND COMMUNICATION, PO BOX 654 PONCE DE LEON, FL  
KURT BUMPASS, DIRECTOR OF RESEARCH AND INFORMATION, 429 106TH PL SW, EVERETT, WA

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

FRANK BARONE JR  
2920 HIGHWAY 81  
PONCE DE LEON, FL 32455

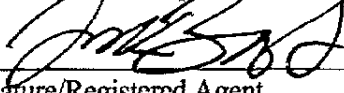
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

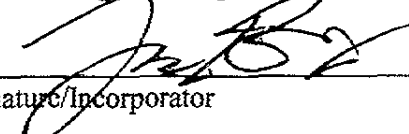
FRANK BARONE JR  
PO BOX 654  
PONCE DE LEON, FL 32455

\*\*\*\*\*

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

05/26/03  
Date

  
\_\_\_\_\_  
Signature/Incorporator

05/26/03  
Date

FILED  
03 MAY 29 AM 10:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA