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PICK-UP	WAIT	MAIL MAIL
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Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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Office Use Only		
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## STATE OF FLORIDA

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314
Telephone: (850) 488 - 9000

Internet: www.sunbiz.org

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

The undersigned, acting as incorporator (s) of a Corporation pursuant to Section 607.164, Florida Statutes, adopt (s) the following Articles of Incorporation for such Corporation:

#### ARTICLE I

The name of the Corporation and location is:

AFFORDABLE POOL LEAK DETECTION INC., 9345 BENT PINE CIRCLE EAST LAKE WORTH, FLORIDA 33467

## ARTICLE II

The period of the duration of this corporation is **PERPETUAL** unless dissolved according to law. Corporate existence shall commence upon the time of the filing of the Articles of Incorporation by the Department of State.

#### ARTICLE III

The purpose or purposes for which the corporation is organized are:

This Corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other State, County, Territory or Nation.

#### ARTICLE IV

The number of Shares Authorized are 9,000 (par) value with a value of \$1.00 per share.

The classes of shares shall be defined as follows: COMMON STOCK

### ARTICLE V

If the shares are divided into classes, the rights of each class shall be defined as follows:

NOT APPLICABLE

ARTICLE VI

The preemptive rights, if any, are granted as follows:

NOT APPLICABLE

ARTICLE VII

The street address of the initial registered office and the name of the initial agent at such address:

REGISTERED AGENT

**ADDRESS** 

**KENNETH ISYK** 

9345 BENT PINE CIRCLE EAST LAKE WORTH, FLORIDA 33467

ARTICLE VIII

The number of the Directors constituting the initial Board of Directors of the Corporation is 2, and the name (s) and address (es) of the persons who are to serve as the initial directors are:

NAME

**ADDRESS** 

KENNETH ISYK

9345 BENT PINE CIRCLE EAST LAKE WORTH, FLORIDA 33467

**DEBRA ISYK** 

9345 BENT PINE CIRCLE EAST LAKE WORTH, FLORIDA 33467

ARTICLE IX

The name and address of each Incorporator are:

NAME

**ADDRESS** 

**KENNETH ISYK** 

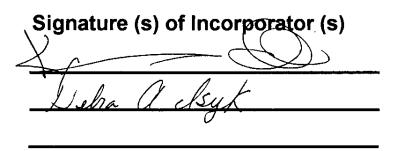
9345 BENT PINE CIRCLE EAST

LAKE WORTH, FLORIDA 33467

**DEBRA ISYK** 

9345 BENT PINE CIRCLE EAST

LAKE WORTH, FLORIDA 33467



# **Acceptance by Registered Agent**

Having been named to accept service of process for the above named corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I accept the duties and obligations of Section 607.325 of the Florida Statutes.

Registered Agent

Sate\ OP

SECRETARY OF STATE