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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				

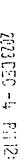
FLORIDA PROFIT/NON PROFIT CORPORATION POOL CONTROL SOLUTIONS CORP.

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu



ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

Effective Dote 1/1/24

ARTICLE 1 NAME: The name of the corporation is:

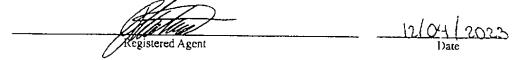
	ARTICLE II PRINCIPAL OFFICE:
Th	he principal street address and mailing address is:
119215	w 240 St Mami Fl33032
ICLE III SI	HARES: The number of shares of stock is:
ARTICLE	IV INITIAL DIRECTORS AND/OR OFFICERS:
Diogo J	ose Cedens Charour (President)
Zoraida (Chanour de Cedeno (Vicepresident)
	NITIAL REGISTERED AGENT AND STREET ADDRESS:
	NITIAL REGISTERED AGENT AND STREET ADDRESS: a street address (PO Box not acceptable) of the registered agent is:
e name and Florida	a street address (PO Box not acceptable) of the registered agent is:
e name and Florida	a street address (PO Box not acceptable) of the registered agent is:
e name and Florida	a street address (PO Box not acceptable) of the registered agent is:
e name and Florida	a street address (PO Box not acceptable) of the registered agent is: OSE CEDONO CHONOUR 2 40 57 Momin FL 35052
name and Florida DIEGO JC	a street address (PO Box not acceptable) of the registered agent is: DSC Cedo no Chokour 240 ST Momi FL 33032
name and Florida Diego Jo 11921 5 (a street address (PO Box not acceptable) of the registered agent is: OSC CEDONO ChONOUT OSC TIONI FL 35057 NCORPORATOR: The name and address of the Incorporator is:
name and Florida Diego Jo 11921 5 (a street address (PO Box not acceptable) of the registered agent is: DSC Cedo no Chokour 240 ST Momi FL 33032

12/05/2823 17:03 3052201440 LAZARUS CORPORATE PAGE 03/03

EIN: 93-4673941

Required Signatures:

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



I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



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