

**DANA L. HARRISON**  
CERTIFIED PUBLIC ACCOUNTANT  
1000 Tamiami Trail North, Suite 503  
Naples, Florida 34102

Tel: 941-263-6626  
Fax: 941-263-3715

MEMBER:  
AMERICAN INSTITUTE OF  
CERTIFIED PUBLIC ACCOUNTANTS

FLORIDA INSTITUTE OF  
CERTIFIED PUBLIC ACCOUNTANTS

December 11, 1998

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

98 DEC 14 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

Re: Incorporation  
POOL CARE OF SOUTHWEST FLORIDA, INC.

Dear Sir:

Enclosed please find the following:

- 1) Articles of Incorporation of  
POOL CARE OF SOUTHWEST FLORIDA, INC.
- 2) Certificate designating Registered Agent.
- 3) Check for \$122.50 covering various fees.

300002712073--9  
-12/14/98--01129--015  
\*\*\*\*122.50 \*\*\*\*\*78.75

Please forward the certified copy of the articles and assigned document number of the corporation to Dana Harrison at the above noted address. Any questions should be directed to the undersigned.

Sincerely,



Dana L. Harrison

Encl.  
DLH:lb

**ARTICLES OF INCORPORATION**  
**OF**  
**POOL CARE OF SOUTHWEST FLORIDA, INC.**

FILED  
98 DEC 14 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned subscriber to these Articles of Incorporation, a natural person, competent to contract, hereby forms a corporation for profit under the laws of the State of Florida.

ARTICLE I - NAME AND ADDRESS

The name of the corporation is POOL CARE OF SOUTHWEST FLORIDA, INC. and its initial post office address and its principal office for conducting business is: 853 Vanderbilt Beach Rd., Unit 265, Naples, FL 34108.

ARTICLE II - DURATION

This corporation shall have perpetual existence, effective upon the filing of these Articles with the Florida Department of State.

ARTICLE III - PURPOSES AND POWERS

The powers of this corporation shall include the transaction of any activity or business permitted under the laws of the United States and this State and this corporation shall have all powers granted to corporations under said laws.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 7,500 shares of \$1.00 par value common stock.

ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The name of the initial Registered Agent of this corporation is Alan Boole and his address is 853 Vanderbilt Beach Rd., Unit 265, Naples, FL 34108.

ARTICLE VII - INCORPORATOR

The name and address of the person signing these Articles is:

ALAN BOOLE  
853 Vanderbilt Beach Rd., Unit 265,  
Naples, FL 34108.

ARTICLE VIII - MANAGEMENT OF CORPORATION

The business of the corporation shall be managed by the stockholders of the corporation rather than by a Board of Directors.

ARTICLE IX - ACTION BY SHAREHOLDER WITHOUT A MEETING

The shareholders of this corporation may take action by written consent, as provided by law, unless otherwise provided in these Articles or by the By-Laws of this corporation.

ARTICLE X - INDEMNIFICATION

This corporation shall indemnify any officer and/or director or any former officers and/or directors to the full extent permitted by law.

ARTICLE XI - BY-LAWS

The powers to adopt, alter, amend or repeal By-Laws shall be vested in the shareholders.

ARTICLE XII - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon shareholders is subject to this reservation.

ARTICLE XIII - RESTRICTIONS ON STOCK TRANSFERS

Each shareholder of any class of stock of the corporation that he or she may hereafter acquire without making it available for purchases by the corporation and then to the remaining shareholders of the corporation should the corporation elect not to purchase any or all of such stock. The manner in which this option may be elected shall be prescribed by the By-Laws of this corporation.

ARTICLE XIV - 1244 STOCK

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

IN WITNESS WHEREOF, I, the undersigned, being the original incorporator to the capital stock hereinbefore named, have hereunto set my hand and seal this 11<sup>th</sup> Day of December, 1998.



ALAN BOOLE, Incorporator

STATE OF FLORIDA

COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 11<sup>th</sup> Day of December, 1998 by ALAN BOOLE.

  
Notary Public

My Commission Expires:



Dana L. Harrison  
My Commission CC752782  
Expires August 1, 2002

Personally Known  OR Produced Identification .

Type of Identification Produced \_\_\_\_\_.

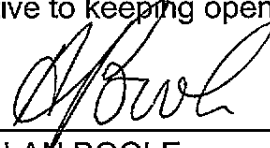
CERTIFICATE DESIGNATING REGISTERED AGENT

Pursuant to Chapter 607.0501, Florida Statutes, the following is submitted in compliance with said Act.

POOL CARE OF SOUTHWEST FLORIDA, INC., desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation, at 853 Vanderbilt Beach Rd., Unit 265, Naples, FL 34108., has named ALAN BOOLE located at 853 Vanderbilt Beach Rd., Unit 265, Naples, FL 34108., as its agent to accept service of process within this State.

ACKNOWLEDGMENT

Having been named to accept service of process for the above-stated corporation, at the place designated in the certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.



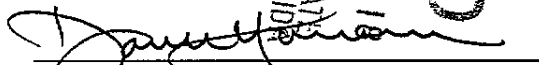
ALAN BOOLE

STATE OF FLORIDA

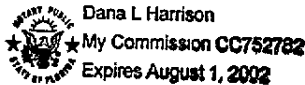
COUNTY OF COLLIER

The foregoing instrument was acknowledged before me 11<sup>th</sup> Day of December, 1998 by ALAN BOOLE

FILED  
98 DEC 14 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

  
Notary Public

My Commission Expires:



Personally Known  OR Produced Identification \_\_\_\_  
Type of Identification Produced \_\_\_\_\_