FEI Number: NOT APPLICABLE		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
FREYER, WILL 4059 PINE CON NORTH PORT,	IE TERR			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
SIGNATURE				
OIGNATORE	: WILLIAM FREYER		01,	/30/2023
ORMATORE	Electronic Signature of Registered Agent		01,	/30/2023 Date
Officer/Direc	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title	01. VP	
Officer/Diree	Electronic Signature of Registered Agent	Title Name		
Officer/Dired	Electronic Signature of Registered Agent ctor Detail : P		VP	

Current Mailing Address:

4059 PINE CONE TERR NORTH PORT, FL 34286

DOCUMENT# P21000094364

4059 PINE CONE TERR NORTH PORT, FL 34286 US

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Entity Name: BETTER POOLS AND SPAS INC.

Current Principal Place of Business:

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM FREYER

PRESIDENT

01/30/2023

Electronic Signature of Signing Officer/Director Detail

Date