SIGNATURE: MARIA THERESA PINO

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000044474

Entity Name: NATIONAL POOLS OF MIAMI LLC

Current Principal Place of Business:

6839 SOUTHWEST 114TH PLACE UNIT B MIAMI, FL 33173

Current Mailing Address:

6839 SOUTHWEST 114TH PLACE UNIT B MIAMI, FL 33173 US

FEI Number: 61-1645868

Name and Address of Current Registered Agent:

IGLESIAS, OVIDIO 6839 SOUTHWEST 114TH PLACE UNIT B MIAMI, FL 33173 US

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:

	Electronic Signature of Registered Agent			Da
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	PINO, MARIA TMGR	Name	IGLESIAS, OVIDIO	
Address	6839 SOUTHWEST 114TH PLACE #B	Address	6839 SOUTHWEST 114TH PLACE #E	3
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	MIAMI FL 33186	

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and

MANAGER

FILED Apr 17, 2013 Secretary of State CC2160561558

Certificate of Status Desired: Yes

04/17/2013

Date

Date