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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SECRETARY

SIGNATURE: TARA MARIE FOLEY

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L19000095031

Entity Name: CUSTOM POOLS OF S.W. FLORIDA, LLC

Current Principal Place of Business:

12456 N. ACCESS ROAD UNIT D PORT CHARLOTTE, FL 33981

Current Mailing Address:

12456 N. ACCESS ROAD UNIT C PORT CHARLOTTE, FL 33981 US

FEI Number: 83-4382022

Name and Address of Current Registered Agent:

CASA, JOHN T 12456 N. ACCESS ROAD UNIT C PORT CHARLOTTE, FL 33981 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

Authorized Person(s) Detail :			
Title	P	Title	VP
Name	CASA, JOHN T	Name	CASA, ANTHONY J
Address	12456 N. ACCESS ROAD, UNIT C	Address	12456 N. ACCESS ROAD, UNIT C
City-State-Zip:	PORT CHARLOTTE FL 33981	City-State-Zip:	PORT CHARLOTTE FL 33981
Title	S		
Name	FOLEY, TARA M		
Address	12456 N. ACCESS ROAD, UNIT C		
City-State-Zip:	PORT CHARLOTTE FL 33981		

Certificate of Status Desired: Yes

FILED Jan 15, 2020 Secretary of State 5415404508CC

> 01/15/2020 Date

Date