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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: PAULS POOL SERVICE LLC (Name of Limited Liability Company)				
The enclosed Articles of Organization and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
PAUL CAMBRON (Name of Person)				
PAULS POOL SERVICE (Firm/Company)				
320 GOTH STREET WEST				
BRADENTON FL 34209 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Paul CAMBRON at (941) 794-2276 - (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)				
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 24, 2005

PAUL CAMBRON PAULS POOL SERVICE 320 60TH STREET WEST BRADENTON, FL 34209

SUBJECT: PAULS POOL SERVICE LLC

Ref. Number: W05000015046

We have received your document for PAULS POOL SERVICE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to include the second page of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 605A00020068

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
PAULS POOL SERVICE LLC				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:		Mailing Address:		
320 GOTH ISRADENTON	STREET WEST FL 34209	BRADENTON, FL 34209		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
The name and the Florida street address of the registered agent are:				
PAUL CAMBRON				
Name				
	320 GOTH STR	GET WEST FOR S		
Florida street address (P.O. Box NOT acceptable)				
BRADENTON FL 34209				
City, State, and Zip				
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with				
and accept the oblig	gations of my position as reg Registered Agent's	ristered agent as provided for in Chapter 608, F.S Signature		

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: ÷ Signature of a member or an authorized representative of a member, (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ARTICLE IV- Manager(s) or Managing Member(s):

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee