Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305) 444-4994 Fax Number : {305}444-4977

FLORIDA/FOREIGN LIMITED LIABILITY CO.

POOLS BY DESIGN & GENERAL CONTRACTORS, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

POOLS BY DESIGN & GENERAL CONTRACTORS, LLC.

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
2760 WEST 84TH STREET	2760 WEST 84TH STREET UNIT 12
HIALEAH, FL 33016	HIALEAH, FL 33016

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Name

2760 WEST 84TH STREET - UNIT 12

Florida street address (P.O. Box NOT acceptable)

HIALEAH

FL 33016

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.

istered Agent's Sagnature (REQUIRED)

(CONTINUED)
Page 1 of 2

SECRETARY OF STATE

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

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<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Me	mber
MGRM	DANIEL AJETE
	2780 WEST 84TH STREET -UNIT 12
	HIALEAH, FL 33016
MGRM	RAUL RODRIGUEZ
	2760 WEST 84TH STREET - UNIT 12
	HIALEAH, FL 33016
MGRM	ALAIN R. VEGA
	2760 WEST 84TH STREET - UNIT 12
	HIALEAH, FL 33016
(Use attachment if necessar	•
LE V: Effective date, if other fective date is listed, the date is listed, the date of filling	er than the date of filing:
ffective date is listed, the da	ate must be specific and cannot be more than five business days
ffective date is listed, the date days after the date of filing	ate must be specific and cannot be more than five business days
ffective date is listed, the date days after the date of filing REQUIRED SIGNATUR Signature (In accordate of this doctory)	te must be specific and cannot be more than five business days

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)