

607000041263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

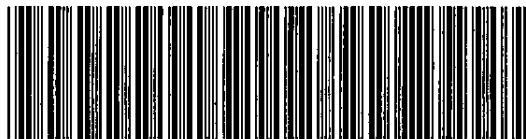
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2007 APR 16 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

607-41263  
92

EFFECTIVE DATE

4-20-07

**TRANSMITTAL LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: ALL POINTS POOLS, LLC

(Proposed company name - must include suffix)

Enclosed is an original and one (1) copy of the Limited Liability Company and a check for:

☐ \$125.00  
Filing fee & Designation  
of Registered Agent

☒ \$130.00  
Filing Fee, Designation of  
Registered Agent, &  
Certificate of Status

☐ \$160.00  
Filing Fee, Designation  
of Registered Agent,  
Certified Copy, &  
Certificate of Status

Please return all correspondence concerning this matter to the following:

**KATHY LUCAS  
425 VALENCIA COURT  
LONGWOOD, FL 32750**

For Further information concerning this matter, please call: KATHY LUCAS  
at (407) 260-1439.

**Street Address:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2017 APR 16 AM 10:10

**ARTICLES OF ORGANIZATION**

**OF**

**ALL POINTS POOLS, LLC**

The undersigned subscribers to this limited liability company, natural persons competent to contract, hereby form a limited liability company under the laws of the State of Florida.

**ARTICLE I - NAME**

The name of the Limited Liability Company is: ALL POINTS POOLS, LLC.

**ARTICLE II - ADDRESS**

The mailing address and the street address of the principal office of the Limited Liability Company is 425 VALENCIA COURT, LONGWOOD, FLORIDA 32750.

**ARTICLE III - REGISTERED AGENT**

The registered agent of this company shall be:


NAME

ADDRESS

KATHY LUCAS

425 VALENCIA COURT  
LONGWOOD, FL 32750

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.

  
KATHY LUCAS

07 APR 16 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

4-20-07

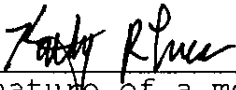
**ARTICLE IV - MANAGEMENT**

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
Manager	KATHY LUCAS 425 VALENCIA COURT LONGWOOD, FL 32750
Managing Member	JOSEPH OSWALD, JR. 425 VALENCIA COURT LONGWOOD, FL 32750

**ARTICLE V - EFFECTIVE DATE**

The effective date of the Limited Liability Company is requested to be **April 20, 2007.**

  
\_\_\_\_\_  
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.)*

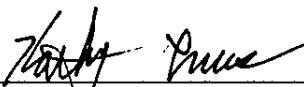
KATHY LUCAS  
\_\_\_\_\_  
Printed name of signee

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)

2007 APR 16 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

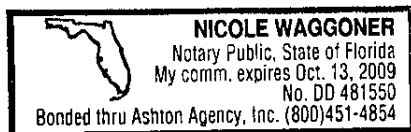
IN WITNESS WHEREOF, We have hereunto set our hands and seals, acknowledged and filed the foregoing Limited Liability Company under the laws of the State of Florida this 13th day of April 2007.

  
KATHY LUCAS

STATE OF FLORIDA     )  
                                  )  
COUNTY OF SEMINOLE   )

The foregoing instrument was acknowledged before me this 13th day of April 2007, by KATHY LUCAS, who is personally known to me or who has produced driver's license as identification and who did take an oath.

FL DL #C220-5/3-58-8660



  
Notary Public, State of Florida  
At Large

My Commission Expires:

Having been named as Registered Agent and to accept Service of Process for the above-stated company at the place designated herein, 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.

  
KATHY LUCAS

DATE: April 13, 2007

2007 APR 16 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA