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SECRETARY OF STATE
TAIL AHASSEE FLORIDA

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2009

KEVIN R. SIMS 17200 NW 9TH PLACE MIAMI, FL 33169

SUBJECT: PRO AQUATICS, LLC Ref. Number: W09000017936

We have received your document for PRO AQUATICS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

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

Letter Number: 309A00012848

# **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ	ECT: Pro Aquatics of USA LI	LC
5020		nited Liability Company)
The en	aclosed Articles of Organization and fee(s) a	re submitted for filing.
Please	return all correspondence concerning this m	eatter to the following:
	Kevin R. Sims	
		(Name of Person)
	Pro Aquatics of USA LLC	
		(Firm/Company)
	17200 NW 9th Place	
		(Address)
	Miami, Florida, 33169	
	. (1	City/State and Zip Code)
For fu	rther information concerning this matter, ple	ase call:
Kev	in R. Sims	at ( 305 ) 746-1333
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclo	sed is a check for the following amount:	
<b>□\$12</b> 5	.00 Filing Fee \$\sum \\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Sign 160.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

p.4

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	S:	
Pro Aquatics of USA LLC		
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address:		th
The mailing address and street address of the p	principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
17200 NW 9th Place, Miami Gardens, Florida, 33169	17200 NW 9th Place, Miami Gardens,	Florida, 33169
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.)		
The name and the Florida street address of the	registered agent are:	TALE SE
Kevin R. Sims		OG APR 16 SECRETARE TALLAHASS
Nam	c	AS TA
17200 NW 9th Place		<i>ω</i> ?
17200 NW 9th Plac	e	
The second secon	ddress (P.O. Box <u>NOT</u> acceptable)	
The second secon	ddress (P.O. Box NOT acceptable)	Ho P

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.

Registered Agent's Signature (REQUIRED)

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

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

Title:		Name and Address:	
"MGR" = Man	~		
"MGRM" = M	anaging Member		
MGR	ŀ	(evin R. Sims	
	9	141 NE 169 Street #202	<del>,,</del>
	1	Iorth Miami Beach, Florida, 33162	······································
MGRM	•	Ken C. Robinson	
	<del></del> -	941 NE 169 Street #202	•
	1	orth Miami Beach, Florida, 33162	
MGRM		hatcher Robertson	
		0080 Reflections Blvd. #202	
		Sunrise, Florida, 33351	<del></del>
	<del></del>		
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(Use attachmen	it if necessary)		
	•••	•	
LE V: Effective	e date, if other than the date of	of filing: (C	PTIONAL
ffective date is l	isted, the date must be spec	ific and cannot be more than five bus	
days after the	date of filing.)		•
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DEALBRED C	ICNIATIDE.	,	ECE 2
<u>REQUIRED</u> S	IGNATURE:		APR CRET
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	Signature of a member or an	authorized representative of a member.	
	_	•	12S 25
	(In accordance with section 60 of this document constitutes a that the facts stated herein a	08.408(3), Florida Statutes, the execution n affirmation under the penalties of perjury re true.)	PM 12: 42 OF STATE EFLORIDA
	Varia D. Cima	·-···	

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)

Typed or printed name of signee