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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALLAHASSEE, FLORID

C. LEWIS

OCT 14 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 30, 2009

JULIA ACACIO DINIZ 2174 SW GAILWOOD STREET PORT SAINT LUCIE, FL 34987

SUBJECT: JUST FOR POOLS, INC.

Ref. Number: W09000048377

We have received your document for JUST FOR POOLS, INC. and your check(s) totaling \$87.50. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The registered agent must have a Florida street address. A post office box is not acceptable.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

An effective date may be added to the Articles of Incorporation if a 2010 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the corrected original and one copy of 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) 245-6869.

Christine Haney Senior Clerk New Filing Section

Letter Number: 809A00034391

COVER LETTER

.. TO:

	ion Section of Corporations				
SUBJECT: JU	ST FOR POOLS, LI Name of Limit	ted Liability Compa	ia A	cacioDiniz,	<u> </u>
The enclosed Artic	eles of Organization and fee(s) are	submitted for filing	ţ.		
Please return all co	orrespondence concerning this mat	tter to the following	:		
<u>JULIA</u>	ACACIO DINIZ	Name of Person			
JUST	FOR POOLS, LLC	Julia Firm/Company	~ Ac	acio Diniz	
2174 \$	SW GAILWOOD STF	REET			
,		Address			
PORT S	SAINT LUCIE, FLORI	DA, 34987			
AA DINUS		ty/State and Zip Code	;		
WI.DINIZ	Z@LIVE.COM E-mail address: (to be used	for future annual repo	ort notification	n)	
For further information	ation concerning this matter, pleas	se call:			
JULIA ACAC	IO DINIZ	_{at (} 561	305-865	51	
1	Name of Person		& Daytime T	elephone Number	
Enclosed is a che	ck for the following amount:				
]\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
·	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton B 2661 Exe	ourier Addre on Section of Corporation uilding ocutive Cente ee, FL 3230	ons er Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
JULIA ACACIO DINIZ LLC (Must end with the words Limited Liability)	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2174 SW GAILWOOD STREET PORT SAINT LUCIE, FL, 34987	SAME
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registered address of the registered address.	ered Agent. You must designate an individual or another egistered agent are:
JULIA ACACIO DINIZ	HASSEE
2174 SW GAILW	OOD STREET
Florida street addr	ress (P.O. Box NOT acceptable)

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.

City, State, and Zip

re/gistered Agent's Signature (REQUIRED)

(CONTINUED)

	ARTICLE IV- Manager(s) or Ma The name and address of each Mana			ws: FIL	EU
	Title:		Name and Address:	2014 OCT 1-3	
	"MGR" = Manager "MGRM" = Managing Member			SECRETARY TALLAHASSE	OF STATE E.FLORID
	"MGRM		JULIA ACACIO DINIZ		
	•		2174 SW GAILWOOD STREET PORT SAINT LUCIE, FL, 34987		
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	(Use attachment if necessary)		I		
e	LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:				
	- fulli	1	acorcio Muig) Imbon	F.
	(In accordance with section 60 constitutes an affirmation unde	8.408er the	(3), Florida Statutes, the execution of the penalties of perjury that the facts stated in submitted in a document to the Department of the Department of the Technology (1988).	his document I herein are true.	i de la companya de l
	JÚLIA ACACI		<u></u> <u></u>	_	
		ypea (or printed name of signee		
	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)