L11000127026

(Requestor's Name)		
(Ad	dress)	<u> </u>
	•	
(Address)		
(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	MAIT	MAIL
(D.		
(Bu	siness Entity Nar	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	s of Status
	-	
Special Instructions to	Filing Officer:	:
		•
		į

Office Use Only



300213866903

11/07/11--01011--029 **160.00

HILEU

11 NOV -7 AM II: 3
SECKETARY OF STATI
JALLAHASSEE, FLORIC

SFFERTIVE DATE

COVER LETTER

10: Registration Section Division of Corporations					
SUBJECT: Integrity Pool Services 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:					
Todd C. Re	eves				
		Name of Person			
Integrity Po	ol Services	LLC			
		Firm/Company			
7560 Ladso	on Terrace				
		Address	· 		
Lake Worth, Fl	33467				
	Cit	ry/State and Zip Code			
Kaylo140@aol					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Kathleen G. Loehrig at 662-9905					
Name of Person Area Code & Daytime Telephone Number			phone Number		
Enclosed is a check for the f	following amount:	_			
	0.00 Filing Fee & rtificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Reg Div P.O	istration Section ision of Corporations Box 6327 lahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center (Tallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKTICLE I - Name:				
The name of the Limited Liability Company is:				
Integrity Pool Services LLC				
(Must end with the words "Limited Liability C	Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Compa	any is:		
Principal Office Address:	Aailing Address:			
	441 Trescott Drive ake Worth, FL 33467			
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)		IA SE	=	
The name and the Florida street address of the registered agent are:			NON	_
Todd C. Reeves		SSE	-7	֡֝֟֝֟֝֟֝֟֝֟
Name		<u>in</u>	>-	
7560 Ladson Ter	race	S)/	¥	•
Florida street address	s (P.O. Box NOT acceptable)	召兰	.:. .:.	

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

Registered Agent's Signature (REQUIRED)

Lake Worth,

(CONTINUED)

Page 1 of 2

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" = Manager "MGRM" = Managing Member		
MORIAL — Managing Member		
MGR	Todd C. Reeves	
	7560 Ladson Terrace	
	Lake Worth, FL 33467	
MGR	Kathleen G. Loehrig	
	7441 Trescott Drive	
	Lake Worth, FL 33467	
	The control of the co	
		
		
		
		-
(Use attachment if necessary)		

ARTICLE V: Effective date, if other than the date of filing: 11/01/2011 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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. . I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Todd C. Reeves

Typed 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)