1200006663

| (Requestor's Name) | | |
|---|-------------------|-----------|
| (Address) | | |
| (Address) | | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | , |
| | | |

Office Use Only

B. KOHR

MAY 1 / 2012

EXAMINER



700235123317

05/16/12--01004--003 **125.00

DAVID P. JOHNSON

Attorney and Counselor at Law 2201 Ringling Boulevard Suite 104 Sarasota, Florida 34237

CERTIFIED PUBLIC ACCOUNTANT

CERTIFIED FINANCIAL PLANNER ®

PERSONAL FINANCIAL SPECIALIST SM

CHARTERED LIFE UNDERWRITER ®

CHARTERED FINANCIAL CONSULTANT ®

Phone: (941) 365-0118

Fax: (941) 955-3391

Email: dpj.esq@verizon.net

DavidPJohnsonLaw.com

May 8, 2011

FLORIDA BAR BOARD CERTIFIED TAX LAWYER

FLORIDA BAR BOARD CERTIFIED WILLS, TRUSTS & ESTATES LAWYER

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE: OnQ Pools, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

David P. Johnson, Esq. 2201 Ringling Boulevard Suite 104 Sarasota, Florida 34237

For further information concerning this matter, please call:

David P. Johnson, Esq. at (941) 365-0118.

Enclosed is a check for \$125 representing the filing and registered agent fees.

Very truly yours,

DAVID P. JOHNSON

Enclosures

ARTICLES OF ORGANIZATION-OF ONQ POOLS, LLC

ARTICLE I Name

The name of the Limited Liability Company is ONQ POOLS, LLC.

ARTICLE II Address

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

Principal Office Address:

Mailing Address:

8499 South Tamiami Trail, No. $265\,$

8499 South Tamiami Trail, No. 265

Sarasota, FL 34238

Sarasota, FL 34238

ARTICLE III Registered Agent, Registered Office & Resident Agents Signature

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

Anthony D. Quattrone 8499 South Tamiami Trail, No. 265 Sarasota, FL 34238

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, Florida Statutes.

ANTHONY D. QUATTRONE

ARTICLE IV Manager

The name and address of the Manager is:

CHRISTOPHER A. QUATTRONE 8499 South Tamiami Trail, No. 265 Sarasota, FL 34238

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

ANTHONY D. QUATTRONE
Authorized Representative of Manager and Member