Electronic Articles of Organization For Florida Limited Liability Company

L16000200847 FILED 8:00 AM November 01, 2016 Sec. Of State slsingleton

Article I

The name of the Limited Liability Company is:

MIKE'S POOL SERVICING AND REPAIR LLC

Article II

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

11803 SW 59TH CT COOPER CITY, FL. 33330

The mailing address of the Limited Liability Company is:

11803 SW 59TH CT COOPER CITY, FL. 33330

Article III

Other provisions, if any:

POOL SERVICING AND REPAIR

Article IV

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

MICHAEL HOPKINS 11803 SW 59TH CT COOPER CITY, FL. 33330

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.

Registered Agent Signature: MICHAEL HOPKINS

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGR MICHAEL HOPKINS 11803 SW 59TH CT COOPER CITY, FL. 33330

Title: MGR ALICIA HOPKINS 11803 SW 59TH CT COOPER CITY, FL. 33330 L16000200847 FILED 8:00 AM November 01, 2016 Sec. Of State slsingleton

Signature of member or an authorized representative

Electronic Signature: MICHAEL HOPKINS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.