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Division of Corporations

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From:

Account Name : TAX SAVERS Account Number : 120150000107 Phone : (941)625-1925

: (941)625-1526

Email Address: mgweld1989@gmail.com

## FLORIDA LIMITED LIABILITY CO.

Connerton Pool Supply, LLC

Certificate of Status	0
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72024 July A. J.

<sup>\*\*</sup>Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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he mailing address and stree	t address of the principal off	ice of the Limited 1	Liability Company is:			
Princ	ipal Office Address:		Mailing Addre	ŧc·		
			Promite Addit	<u> </u>		
1139 JARDIN DE			JARDIN DR <sup>†</sup>			
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am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

.13

Registered Agent's Signature (REQUIRED)

(CONTINUED)

AMBR  JORDAN WELD  1139 JARDIN DR  NAPLES, FL 34104   CLE V: Effective date, if other than the date of filing:  (Use attachment if necessary)  CLE V: Effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days fee of filing.)  If the date inserted in this block does not meet the applicable statutory filing fequirements, this date will not be liberature of State in Series on the Department of State's records.  CLE VI: Other provisions, if any.  AND ALL LAWFUL BUSINESS  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes.  Lamanage that any false information submitted in a decorption of the provision of				THE THURSE	Liability Company:	
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