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DEPAREMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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EXAMINER

COVER LETTER

in Florida..

Registration Section TO: **Division of Corporations**

SUBJECT: MYSTIC POOLS, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
JAMES DAVIS
Name of Person
UNITED CRS, INC
Firm/Company
327 Hollow Creek Ln
Address
Havana, FL 32333
City/State and Zip Code
jimmy@unitedcrs.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James Davis at (850) 539-8000
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\sumsymbol{\sum}\$\$\\$125.00\text{ Filing Fee}\$ Certificate of Status \$\sum_{\text{Certified Copy}}\$

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

1. Mystic Pools, LLC (Name of Foreign Limited Liability Company; must include the company).	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	of transacting business in Florida and attach a copy of the written nate name. The alternate name must include "Limited Liability
2. Georgia 3.	27-4437415
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 12-29-2010 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Registration	
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	ida, if prior to registration.) o determine penalty liability)
7. 667 Tyson Lane	FE = -
Quitman, GA 31643	2 2 8 F
8. If limited liability company is a manager-managed of	f Principal Office)
9. The name and usual business addresses of the management	ging members or managers are as follows:
William D. Spencer	
667 Tyson Lane	
Quitman, GA 31643	
10. Attached is an original certificate of existence, no more than 90 dathe jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be submit	
11. Nature of business or purposes to be conducted or	promoted in Florida: Any and All Lawful Business
	•
Signature of a member or an auth	norized representative of a member.
	ion of this document constitutes an affirmation under the
	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.)

Typed or printed name of signee

William D. Spencer

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability	Company is:		
Mystic Pools, LLC			_
If unavailable, the alternate to be used	in the state of Florida is:		
2. The name and the Florida street ad	dress of the registered agent and office are:	SEC TALL	
James Davis			11
	(Name)	ASS	200000
327 Hollow Cree	k Ln	± 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	m
Florida Stre	eet Address (P.O. Box NOT ACCEPTABLE)		
Havana	_{FL} 32333	AIDA	
	City/State/Zip		

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.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

MYSTIC POOLS LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 12/29/2010 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 14th day of January, 2011

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 6339455-1 Reference. Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp