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N. Outligen JAM S of York

#### **COVER LETTER**

TO: Registration Section  Division of Corporations
SUBJECT: Pembroke Pools and Stas, LCC 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:
David R. Doebler Name of Person
Firm/Company
75 14th 57 NE, UNIT 4260 Address
ATLANTA, F1 30309  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kenneth L. Scilet at (407) 454 4991  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:  \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$130.00 Filing Fee & Certificate of Status}} \Bigsim \mathbb{\text{\$155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status}} \Bigsim \mathbb{\text{\$160.00 Filing Fee, Certificate of Status}} \Bigsim \te

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMI LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	TITED TO REGISTER A FOREIGN
1. Pembroke Pools and Spas, Company; must include "Limited Liability Company,"	"L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Floric consent of the managers or managing members adopting the alternate name. The alternate name mu Company," "L.L.C," "LLC.")	ust include "Limited Liability
2. (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if a company is organized)	applicable)
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	<del></del>
5. 8415 PINES BEND	28
Pen broke fines Fc 3302 (Street Address of Principal Office)	4
· · · · · · · · · · · · · · · · · · ·	27
6. 25 19th ST. NE, UNIT 4260	The state of the s
Atlanta, 6A 30309	
7. The name, title or capacity and address of the person(s) who has/have authority	v to manage is/are:
Devid R. Loebler - Member	y to manage 13 are.
SeTH LuciA - Member	
Kenneth L. Scilley - VP of	Operations
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certific translation of the certificate under oath of the translator must be submitted.)	<del>-</del> •
Signature of an authorized person	
· · · · · · · · · · · · · · · · · · ·	
(In accordance with section 605.0203, F.S., the execution of this document constitutes an a penalties of perjury that the facts stated herein are true. I am aware that any false inform	nation submitted in a
document to the Department of State constitutes a third degree felony as provided	1 for in s.817.155, F.S.)

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE

FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED

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 605, 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 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED: January 10, 2014 JURISDICTION

PRINT DATE

: 14003174 : Georgia

: January 14, 2014

#### **CERTIFICATE OF EXISTENCE**

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

> Pembroke Pools and Spas, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. 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.

Brian P. Kemp Secretary of State