

P000000021850

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000009563 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAR -2 PM 2:07

FILED

FLORIDA PROFIT CORPORATION OR P.A.**ABC SWIM CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

**ARTICLES OF INCORPORATION
of
ABC SWIM CORP.**

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ABC SWIM CORP.

FILED
00 MAR -2 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL PLACE OF BUSINESS

The principal place of business and mailing address of this corporation shall be:

**13712-3 SW 147 CIR LN
MIAMI, FL 33186**

ARTICLE III NATURE OF BUSINESS

The general nature of the business to be transacted by the corporation and its object and powers shall be engage in any activity or business permitted under the laws of the United States and the State of Florida.

H00000009563 8

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 THOUSAND SHARES OF COMMON STOCK OF THE PAR VALUE OF ONE DOLLAR PER SHARE.

The consideration to be paid for each share shall be fixed by the Board of Directors.

ARTICLE V TERM OF EXISTENCE

This Corporation shall have perpetual existence from the date of the incorporation's execution and adoption of these Articles of Incorporation.

**ARTICLE VI INITIAL REGISTERED AGENT AND
OFFICE STREET ADDRESS**

The name and address of the initial registered agent is:

GUSTAVO BUCARO
13712-3 SW 147 CIR LN
MIAMI, FL 33186

H00000009563 8

ARTICLE VII DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

GUSTAVO BUCARO ^P
13712-3 SW 147 CIR LN
MIAMI, FL 33186

ARTICLE VIII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GUSTAVO BUCARO ^P
13712-3 SW 147 CIR LN
MIAMI, FL 33186

has(have) executed these Articles of Incorporation this 01th day of MARCH 2000.


Signature

Signature

Signature

ARTICLE IX AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by the Stockholders, and approved at the Stockholder's meeting by a majority of the stock entitle to vote thereon, unless all the Directors and all the Stockholder's sign a written statement manifesting their intention that a certain amendment of these Article of Incorporation be made.

**CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED
PLACE OF BUSINESS OR DOMICILE FOR THE PROCESS WITHIN THE
STATE OF FLORIDA, AND ACCEPTANCE OF AGEN UPON WHOM
PROCESS MAY BE SERVED**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

ABC SWIM CORP

2. The name and address of the registered agent and office is:

GUSTAVO BUCARO
Name

**13712-3 SW 147 CIR LN
MIAMI, FL 33186
(City/State/Zip)**

ACCEPTANCE OF REGISTERED AGENT

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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 PURSUANT TO F.S. 607.050(3).

SIGNATURE

[Handwritten Signature]

DATE

FILED
00 MAR -2 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA