PHONE NO.: 7273975189

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Florida Department of State

Division of Corporations
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To:

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

From:

Account Name : AL CLARK
Account Number : 072100000173
Phone : (727)398-6011
Fax Number : (727)397-5189

FLORIDA PROFIT CORPORATION OR P.A.

AQUATIC SOLUTIONS POOL SERVICES INC.

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 03

 Estimated Charge
 \$70.00

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under .

Florida Business Corporation Act, hereby adopt(s) the following Articles of
Incorporation.

ARTICLE I NAME

The name of the corporation shall be AQUATIC SOLUTIONS POOL SERVICES INC.

SEGRETARY OF STATE DIVISION OF CORPORATIONS

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ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1475 69TH PLACE S.

SAINT PETERSBURG, FL. 33705

ARTICLE III SHARES

The number(s) of shares of stock that this corporation is authorized to have outstand: any one time is:

1000 SHARES NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

prepared by:

Name: JOHN PEAK

Address: 1475 69TH PLACE S. SAINT PETERSBURG, FL 33705

PH# (727)864-3603

Accounting & Tax Help, IN-8668 PARK BLVD Suite SEMINOLE, Florida 33:

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ARTICLE V DIRECTOR(S)

The number of directors constituting the initial Board of Directors of the corporation is One (1) and the name(s) and address(es) of the person(s) who is to serve as director(s) until the first annual meeting of shareholders or until his or her successor(s) is(are) elected and qualified is(are):

John Peak. 1475 69th Place S. Saint Petersburg, FL 33705

ARTICLE VI INCORPORATOR(S)

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

John Peak 1475 69th Place S. Saint Reters burg, FL 33705

The undersigned incorporator(s) has (have) executed these Articles of Incorp	oration this
4th day of august 20 00.	ا د د
(An additional article must be added if an effective date is requested.)	

¥	Tol Teak
/-	Signature
	Signature
	Signature

Notarization is not required

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE 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:

 AQUATIC SOLUTIONS POOL SERVICES INC.
- 2. The name and address of the registered agent and office is:

Accounting & Tax Help, INC. (Name)

8668 PARK BLVD. Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (City/State/Zip) DIVISION OF CORPORATIONS

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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.

(Signature)

PRESIDENT

DATE 8-7-2000

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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