

P00000074850

FILED

Date

July 20, 2000

00 AUG 18 PM 3:44

Secretary of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

200003364332-9  
-08/18/00--01058--012  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Re: Robert Dean Schiller Pools Inc., Inc.  
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$87.50

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Robert D. Schiller

(individual's name)

Robert D. Schiller

Robert Dean Schiller Pools Inc.  
(name of corporation)

MAILING ADDRESS OF CORPORATION

1831 Palm City Road C302

Stuart, Florida 34994

PHONE

( 561 ) 220-6656

Area Code

Number

Ext.

PA 8/23/00

# ARTICLES OF INCORPORATION

of

FILED

Robert Dean Schiller Pools Inc.  
(name of corporation)

00 AUG 18 PM 3: 44

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I - CORPORATE NAME

The name of the corporation is:

Robert Dean Schiller Pools Inc.

## ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

## ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

## ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Fifty Thousand shares ( 50,000 of common one Dollar(s) (\$ 1.00 ) par value Common Stock, which shall be designated "Common Shares."

## ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>Robert Dean Schiller Pools Inc.</u>		
ADDRESS	<u>1831 Palm City Road Apt C302</u>		
CITY	<u>Stuart</u>	FLORIDA	ZIP <u>34990</u>

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>Robert D. Schiller</u>		
ADDRESS	<u>1831 Palm City Road</u>		
CITY	<u>Stuart Fla</u>	FLORIDA	ZIP <u>34994</u>

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have two ( 2 ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Robert D. Schiller</u>		
ADDRESS	<u>1831 Palm City Road Apt c302</u>		
CITY	<u>Stuart</u>	STATE <u>Fl</u>	ZIP <u>34994</u>
NAME	<u>Kim E Schiller</u>		
ADDRESS	<u>1831 Palm City Road Apt C302</u>		
CITY	<u>Stuart</u>	STATE <u>Fl</u>	ZIP <u>34994</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

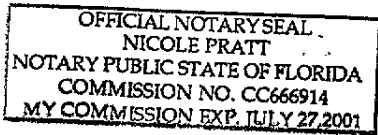
NAME Robert D. Schiller			
ADDRESS 1831 Palm City Rd C302			
CITY	Stuart,	STATE Fla	ZIP 34994
NAME Kim E. Schiller			
ADDRESS 1831 Palm City Road C302			
CITY	Stuart Fl	STATE Florida	ZIP 34994
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 2 day of August, 192000

[Signature] (Seal)

\_\_\_\_ (Seal)

\_\_\_\_ (Seal)



STATE OF FLORIDA )  
COUNTY OF Martin ) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

[Signature]  
Signature

D.L.  
Form of Identification

[Signature]  
Signature

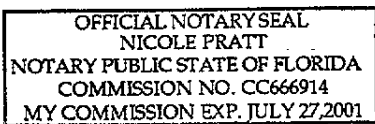
D.L.  
Form of Identification

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that \_\_\_\_\_ executed these Articles of Incorporation, that I relied upon the form \_\_\_\_\_ of identification of the above named person \_\_\_\_\_ as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY RUBBER STAMP SEAL



Witness my hand and official seal in the County and State last aforesaid this 2 day of August, 192000

[Signature]  
Notary Signature  
Nicole Pratt  
Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

FILED

00 AUG 18 PM 3: 44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Robert Dean Schiller Pools Inc.  
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with  
its registered office as indicated in the Articles of Incorporation

at 1831 Palm City Road Apt C302  
Stuart Florida 34994

has named Robert D. Schiller

located at the aforesaid address, as its Registered Agent to accept service of process  
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above  
stated corporation at the place designated in this certificate, and being familiar with  
the obligations of that position, I hereby accept to act in this capacity, and agree to  
comply with the provisions of Florida Law in keeping open said office.

Robert Dean Schiller  
(registered agent)