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Division of Corporations

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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 :

: JIM SIERRA & ASSOCIATES

Account Number : 110677000356
Phone : (305)271-7310
Fax Number : (305)271-4422

FLORIDA PROFIT CORPORATION OR P.A.

SONNY'S POOL AND SPA, INC.

Certificate of Status	0
Certified Copy	人
Page Count	(06)
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

- OF -

SONNY'S POOL AND SPA. INC.

I UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the said State of Florida.

ARTICLE I

The name of this corporation shall be:

SONNY'S POOL AND SPA. INC.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any time is ONE HUNDRED (100) shares of common stock, having a par value of ONE DOLLAR(\$1.00) DOLLAR PER SHARE.

ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than ONE HUNDRED (\$100.00) DOLLARS.

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SECRETARY OF STATE
DIVISION OF CORPORATION

FROM: TAXSMART INC JIM SIERRA ASSOC PHONE NO.: 305 271 4422

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ARTICLE V

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

ARTICLE VI

The initial street address of the principal office of the corporation shall be:

6466 SW 13th Street Miami, Fl 33 I44

ARTICLE VII

The number of Directors of this corporation shall be at least one (1) and no more than five (5).

ARTICLE VIII

The name and street address of the member of the first Board of Directors of this corporation are as follows:

JUAN O. RODRIGUEZ Pres/V-Pres/Treas/Soy 6466 SW 13th Street Miami, FL 33144

ARTICLE IX

The names and street addresses of the persons signing these Articles of Incorporation as subscriber is as follows:

JUAN O. RODRIGUEZ 6466 SW 13th Street Miami, FL 33144

Prepared by: JIM SIERRA & ASSOCIATES 5550 SW 87TH AVENUE MIAMI, FL 33165 TEL. (305) 271-7310 FAX. (305) 271-4422

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FROM: TAXSMART INC JIM SIERRA ASSOC PHONE NO.: 305 271 4422

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ARTICLE X

The corporate existence of this corporation shall begin on the date the Articles of Incorporation are filed of record.

IN WITNESS WHEREOF, the undersigned, JUAN O. RODRIGUEZ being natural person(s), competent to contract, have here unto set his/their hands and seal this, December 19, 2000

ILIAN O. RODKIGUEZ

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STATE OF FLORIDA) S.S. COUNTY OF <u>DADE</u>)

BEFORE ME, the undersigned Notary Public of the State of Florida personally appeared JUAN O. RODRIGUEZ, known and known to me, to be the person(s) described herein and who executed the foregoing Article of Incorporation, and he/she/they acknowledged before me that he/she/they executed the same freely and voluntarily for the purpose therein expressed.

WITNESS my hand and official seal this December 19, 2000

JIM SHERRA

My commission expires:

JIM SIERRA

S COMMISSION # CC 672706

EXPIRES OCT 7, 2001

BONDED THEIL

OF FOR ATLANTIC BONDING CO., INC.

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

ÎN COMPLIANCE W	ITH SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:
FIRST THAT: SON	NY'S POOL AND SPA, INC.
WITH ITS PLACE O	F BUSINESS AT: 6466 SW 13th Street Miami, FL 33144
HAS NAMED	JUAN O. RODRIGUEZ
	(Name of registered Agent)
LOCATED AT	6466 SW 13th Street Miami, FL 33144
	(Street address and number of building - PO Box address ARE NUT acceptable)
CITY OF <u>MIAMI</u> , FLORIDA.	STATE OF FLORIDA AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN
	SIGNATURE (Corporate Officer) JUAN O RODRIGUEZ
	TITLE Pres/V-Pres/Treas/Scy
	DATE December 19, 2000

I, HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE

Registered Acent) JUANO, RODI

DATE December 19, 2000

SECRETARY OF STATE
IVISION OF CORPORATION

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