

TRANSMITTAL LETTER

P01000106373

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

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-11/02/01--01019--008
*****87.50 *****87.50

SUBJECT: KONA POOL SERVICE INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: James E Duffield IV
Name (Printed or typed)

421 SE 5 CT.
Address

Pompano Beach FL 33060
City, State & Zip

954 785-2885
Daytime Telephone number

01 NOV -2 AM 10:07
FILED
SECRETARY OF STATE
TALLAHASSEE, FL 32304

NOTE: Please provide the original and one copy of the articles.

11-5-01
WC

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

KONA POOL SERVICE INC

FILED
01 NOV -2 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P O BOX 1735
Pompano Beach, FL 33061

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

swimming pool business

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

James E Duffield IV
421 SE 5 Ct
Pompano Beach FL 33060

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robyn Duffield
421 SE 5 Ct
Pompano Beach FL 33060

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

10/9/01

Signature/Incorporator

Date

10/9/01