

PO2000019937

TRANSMITTAL LETTER

FILED

02 FEB 18 PM 2:10

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

400004846754--7
-02/18/02-01027-012
*****78.75 *****78.75

SUBJECT: Forry & Father Pools 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: Brian Forry
Name (Printed or typed)
2656 Proctor Rd
Address
Sarasota, FL 34231
City, State & Zip
941-922-5004
Daytime Telephone number

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

D. WHITE FEB 21 2002

2

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FORRY & FATHER POOLS INC.

ARTICLE II PRINCIPAL OFFICE

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

**2656 PROCTOR RD
SARASOTA, FL 34231**

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is:

1000 SHARES OF COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered agent are:

**LINDA JUDD
2776 KILLIAN STREET
NORTH PORT, FL 34286**

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

**BRIAN FORRY, PRESIDENT
2656 PROCTOR RD
SARASOTA, FL 34231**

Brian S. Forry
Signature/Incorporator

2/14/02
Date

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.

Linda Judd
Signature/Registered Agent

2/12/02
Date

FILE
02 FEB 18 PM 2:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED
02 FEB 18 PM 2:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA