# 4028811115

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



SUBJECT: Poseidon Pool & Spa, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an or	iginal and one (1) copy of the art	ticles of incorporation and	d a check for		
□ \$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of		
FROM:	Brian Wyble			2 - 10 - 250 · ·	
	Name (Printed or typed)				
_	7628 SE Autumn Lane		-09/18/02	-01036009	
	Address ******78.75 *****78.75				
-	Hobe Sound, FL 33455		·	er e <del>da</del>	. <u> </u>
	City, S	tate & Zip			=-
_	772-486-4413				
Daytime Telephone number					

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

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## 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:

Poseidon Pool & Spa, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7628 SE Autumn Lane, Hobe Sound, FL

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Pool & Spa Service

### ARTICLE IV SHARES

The number of shares of stock is:

100

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Brian Wyble - President, Vice President, Secretary/Treasurer

### ARTICLE VI REGISTERED AGENT

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

Barbara Wyble 7628 SE Autumn Lane Hobe Sound, FL

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brian Wyble 7628 SE Autumn Lane Hobe Sound, FL 33455

Barbara Ugler	9/14/02
Signature/Registered Agent	Date
1/1/1/	
Tim Make	9/14/02
Signature/Incorporator	Date

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