

P0300000066214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

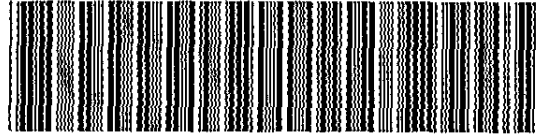
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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7/17/03

## TRANSMITTAL LETTER

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2003 JAN 13 PM 4:20

TALLAHASSEE FLORIDA

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

SUBJECT: AQUA SPECIALTIES, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: JOHN R. LEONHARDT  
Name (Printed or typed)

11205 ALPHARETTA HWY, E-3  
Address

ROSWELL GA 30076  
City, State & Zip

770-993-3462  
Daytime Telephone number

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

ARTICLES OF INCORPORATION  
OF  
AQUA SPECIALTIES, INC.

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CLERK OF STATE  
TALLAHASSEE FLORIDA

ARTICLE I

The name of the corporation shall be AQUA SPECIALTIES, INC.

ARTICLE II

The mailing address for the corporation is: 104 White Heron Drive, Daytona Beach, FL 32119.

ARTICLE III

The purpose for which the corporation is organized is to engage in any lawful act or activity for which corporation may be now or hereafter organized pursuant to the corporation laws of the state of Florida.

ARTICLE IV

The number of shares of stock is one thousand (1,000) all of which shall be common shares with one dollar (\$1.00) par value.

ARTICLE V

The name and address of the registered agent is David Melnicoff, 104 White Heron Drive, Daytona Beach, FL 32119.

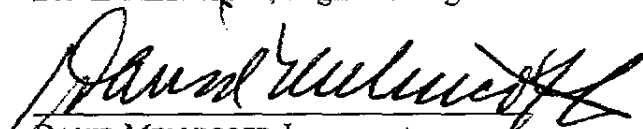
ARTICLE VI

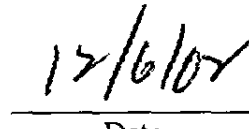
The name and address of the incorporator is: David Melnicoff, 104 White Heron Drive, Daytona Beach, FL 32119.

*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.*

  
DAVID MELNICOFF, Registered Agent

  
Date

  
DAVID MELNICOFF, Incorporator

  
Date