

PO3D000048101

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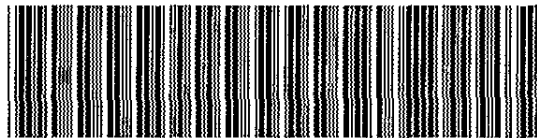
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 APR 29 AM 9:14

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TRANSMITTAL LETTER

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

SUBJECT: AQUA VISIONS 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 A. Dickenson
Name (Printed or typed)

3305 15th AVE. SW.
Address

NAPLES, FLORIDA 34117-5349
City, State & Zip

239-455-7297 or 239-450-1398
Daytime Telephone number

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

1103-10000



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 9, 2003

JOHN A. DICKERSON
3305 15TH AVE S.W.
NAPLES, FL 34117-5349

SUBJECT: AQUA VISIONS INC.
Ref. Number: W03000010068

We have received your document for AQUA VISIONS INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6924.

Stacy Prather
Document Specialist Supervisor
New Filings Section

Letter Number: 103A00021190

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:

AQUA VISION ~~3 INC.~~ FOUNTAINS &
Aeration INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3305 15th AVE. SW
NAPLES, FLORIDA 34117-5349

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL BUSINESS for which Corporations
may be incorporated in the State of FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 -

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Pres. John A. Dickerson 3305 15th Ave. SW. NAPLES FL 34117-5349

ARTICLE VI REGISTERED AGENT

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

John A. Dickerson
3305 15th Ave. SW. NAPLES FLORIDA 34117-5349

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John A. Dickerson
3305 15th Ave. SW. NAPLES FL 34117-5349

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

John A. Dickerson
Signature/Registered Agent

John A. Dickerson

John A. Dickerson
Signature/Incorporator

John A. Dickerson

4-1-2003
Date

4-1-2003
Date

03 APR 29 AM 9:14

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA